

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 94-07269

Priority: July 28, 1983

Maximum Diversion Rate:
Maximum Diversion Volume:¹

0.02 CFS
0.1 AF

This is to certify, that STEVE JOHNSON
CARLA JOHNSON

P.O. BOX 845
PINEHURST, ID 83850

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated June 29, 1983; and has submitted Proof of Beneficial Use on September 30, 1988. An examination indicates that the works have a diversion capacity of .020 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>
STOCKWATER	01/01 to 12/31	0.02 CFS	0.1 AF

LOCATION OF POINT(S) OF DIVERSION: NESW , Sec. 6, Township 48N, Range 02E
SHOSHONE County

PLACE OF USE: STOCKWATER
TWN RGE SEC

48N 02E 6 NESW

CONDITIONS/REMARKS:

1. The maximum diversion volume is defined as the maximum allowable volume of water that may be diverted annually from the source under this right. The use of water confirmed by this right is limited to the amount which can actually be beneficially used. The maximum diversion volume may be adjusted to more accurately describe the beneficial use or to implement accepted standards of diversion and use efficiency.
2. This water right is appurtenant to the described place of use.
3. This right is subject to all prior water rights and may be forfeited by five years of non-use.
4. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.
5. Stockwater use is for 100 chickens, 5 pigs and 2 horses.

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 13TH day of MARCH, 1991.

FILED

Acting for

R. Keith Higginson
R. Keith Higginson, Director

MAR 22 1991

BEFORE THE DEPARTMENT OF WATER RESOURCES
OF THE STATE OF IDAHO

IN THE MATTER OF PERMIT NO. 94-7269 IN THE
NAME OF STEVEN D. OR CARLA R. JOHNSON

)
) 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 September 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 September 30, 1988;

IT IS, THEREFORE, HEREBY ORDERED that Permit No. 94-7269 be REINSTATED and the priority advanced to July 28, 1983.

Dated this 16th day of February, 1989.

MICROFILMED

MAR 17 1989


L. GLEN SAXTON, Chief
Water Allocation Bureau

WATER RIGHT SUMMARY

ACTION	RIGHT NO.	NAME	AMOUNT CFS
Original Permit	94-7269	Jacobsen, Robert A. Pamela	0.08
Full Assignment	94-7269	Johnson, Carla Steve	0.08

MICROFILMET
MAR 17 1989

RECEIVED

OCT 04 1988

State of Idaho
Department of Water Resources

RECEIVED

ASSIGNMENT OF PERMIT

Department of Water Resources

Department of Water Resources
Northern District Office

I, Pamela Jacobsen, hereby assign to Carla or Steve Johnson
of Kelly Gulch, Shoshone County
Address

CHECK ONE



All my right, title, and interest in and to Permit No. 94-7269
to appropriate the public waters of the State of Idaho.



The following described portion of my right, title, and interest in and to Permit
No. _____ to appropriate the public waters of the State of Idaho.

(Describe that portion of the permit being assigned by listing the acreage within
each 40 acre subdivision, the point of diversion and the amount of water in cubic
feet per second for direct diversion, or acre feet for storage)

Made this 29th day of Sept, 19 88.

Pamela M. Jacobsen
Permit Holder
Pamela M. Allen

Spouse of Permit Holder

State of Idaho)
County of Idaho) ss.

On this 29th day of September, 19 88, personally
appeared before me the signer(s) of the above instrument, who duly acknowledged to me
that he (she) (they) executed the same.

seal

Pamela Bower
Notary Public residing at Coeur d'Alene, ID
Expires 5/3/91

My commission expires:
5/3/91

MICROFILMED

MAR 17 1989

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 ROBERT A. OR PAMELA JACOBSEN Phone _____
Post office address Box 1200, PINEHURST, ID 83850
2. Source of water supply GROUNDWATER which is a tributary of _____
3. Location of point of diversion is NE $\frac{1}{4}$ of SW $\frac{1}{4}$ of Section 6 Township 48N
Range 2E B.M. SHOSHONE County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

- Amount 0.08 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. 0.08 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 _____ 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: NE $\frac{1}{4}$ of SW $\frac{1}{4}$ of Section 6 Township 48N
Range 2E 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 20 HEAD
- (4) Name of municipality to be served _____, or number of families to be supplied with domestic water TWO.
- (5) If water is to be used for other purposes describe: _____

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

[illegible]

Total number of acres to be irrigated _____

c. Describe any other water rights used for the same purposes as described above. ~~_____~~

OLD SHALLOW WELL HAS BEEN USE FOR DOMESTIC USE.

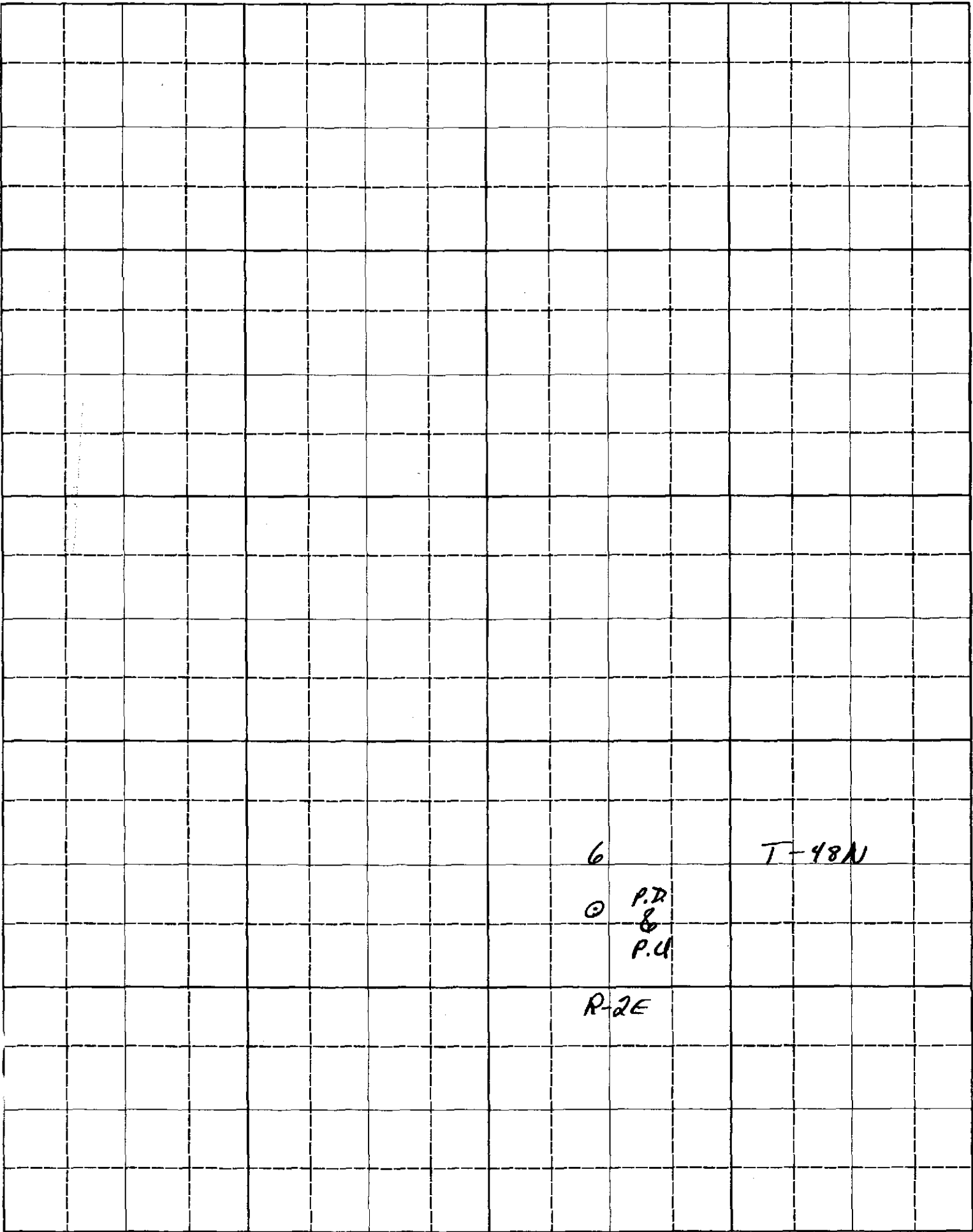
9. a. Who owns the property at the point of diversion APPLICANT

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

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

10. Remarks

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



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.

Robert A. Jacobson
(Applicant)

Proposed Priority 6/29/1983

Received by KK Date 6/29/83 Time 5:00p
Preliminary check by LB Fee \$ 30.00
Receipted by KK Date 6/29/83 # 28497
Publication prepared by KK Date 7/8/83
Published in Helena Evening News
Publication dates 7-20, 7-27-83
Publication approved KK Date 9/1/83
Protests filed by: none

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by [Signature] DRT

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. 94-7269, and said application is hereby APPROVED.

1. Approval of said application is subject to the following limitations and conditions:

- a. SUBJECT TO ALL PRIOR WATER RIGHTS.
- b. Proof of construction of works and application of water to beneficial use shall be submitted on or before September 1, 19 88.
- c. The rate of diversion, if water is to be used for irrigation under this permit, when combined with all other water rights for the same land shall not exceed 0.02 cubic feet per second for each acre of land.
- d. Other: Permit holder shall commence the excavation or construction of diverting works within one year of the date this permit is issued and shall proceed diligently until the project is complete.

Witness my hand this 13th day of September, 1983.

[Signature]
Chief, Operations Bureau

LICENSE REVIEW CHECKLIST

Permit No. 94-7269

Name/Address change? ok ☒

Priority date Advance? yes no ☒

Memo to advance no ☒
Order to reinstate needed? yes no ☒

Total cfs Limited by fee N/A

Limited by capacity no

Total volume Limited by flow no
Chart checked for AF rate/ac N/A

Capacity Actual measurement checked NONE

Theoretical checked NONE

If greater than permit, check for other rts no

Source Changed? yes no ☒
If so, is memo needed to clarify? no

P/D Verify with map no ☒ permit no ☒
More than one per no ☒ Remember remark no ☒
Check p/d overlap N/A

Uses Check irrigation period of use w/ chart N/A

P/U Verify with map no ☒ permit no ☒
> 5 acres irrigated, run overlap N/A

Remarks More than one p/d in no ☒
Description of non-irrig uses no ☒
Special overlap condition no ☒

Conditions -

Measuring device no ☒
W.Master control no ☒
Overlap no ☒
Water quality no ☒
Other no ☒

Dates/Misc. -

Water Dist no ☒
App Rec'd no ☒
Proof Rec'd no ☒

CHECK FOR ADJ. CLAIM Needed according to proof filed no ☒
Filed - needs amended no ☒
Add'l fee required no ☒
Not filed - no ☒
Not needed no ☒

Comments/Changes to Examiner's Recommendations:

FILED

License no ☒ 10-day no ☒ 30-day no ☒

Back of field report signed? no ☒
Reviewer S. Carter Date 2/21/91 Review time 7 min.

SENIOR AGENT REVIEW

RECEIVED
JUN 27 1990

Check List
for
Beneficial Use Field Report

Department of Water Resources

Permit 94-07269

☒ **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

[Signature]

Date 10/16/89

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT SUPPLEMENT II

PHOTOGRAPHS



MICROFILMED

MAR 22 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

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JUN 27 1990

Department of Water Resources

A. GENERAL INFORMATION

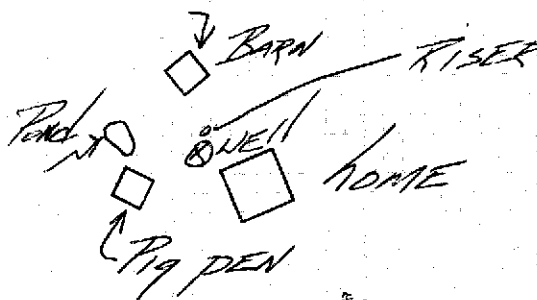
1. Owner: Steven Johnson Permit No. 94-07269
Current Address: PO Box 845 Pocatello ID. 83850 Phone No. 682-4718
2. Accompanied by: _____ EXAM. DATE: 7/28/89
Address: _____ Phone No. _____
Relationship to Permit Holder: _____
3. Source: Groundwater tributary to _____

B. OVERLAP REVIEW

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

C. SYSTEM DESCRIPTION

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



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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
☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater.
(required for irrigation of 10 acres or more).

System Description (continued)

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

*BURIED AT WELL W/ SUBMERSIBLE PUMP ONE
RISER W/ HOSE TO BARN AND SAME HOSE USED
FOR POND AND DIG PEN*

☐ See Remarks on page 4 for continuation

4.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
<i>SUBMERSIBLE</i>					

*Code to correspond with No. on map and aerial photo

5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
					<i>NE 1/4 10</i>	<i>43N</i>	<i>2E</i>	<i>Sherburne</i>	<i>Map</i>

6. Place(s) of Use:

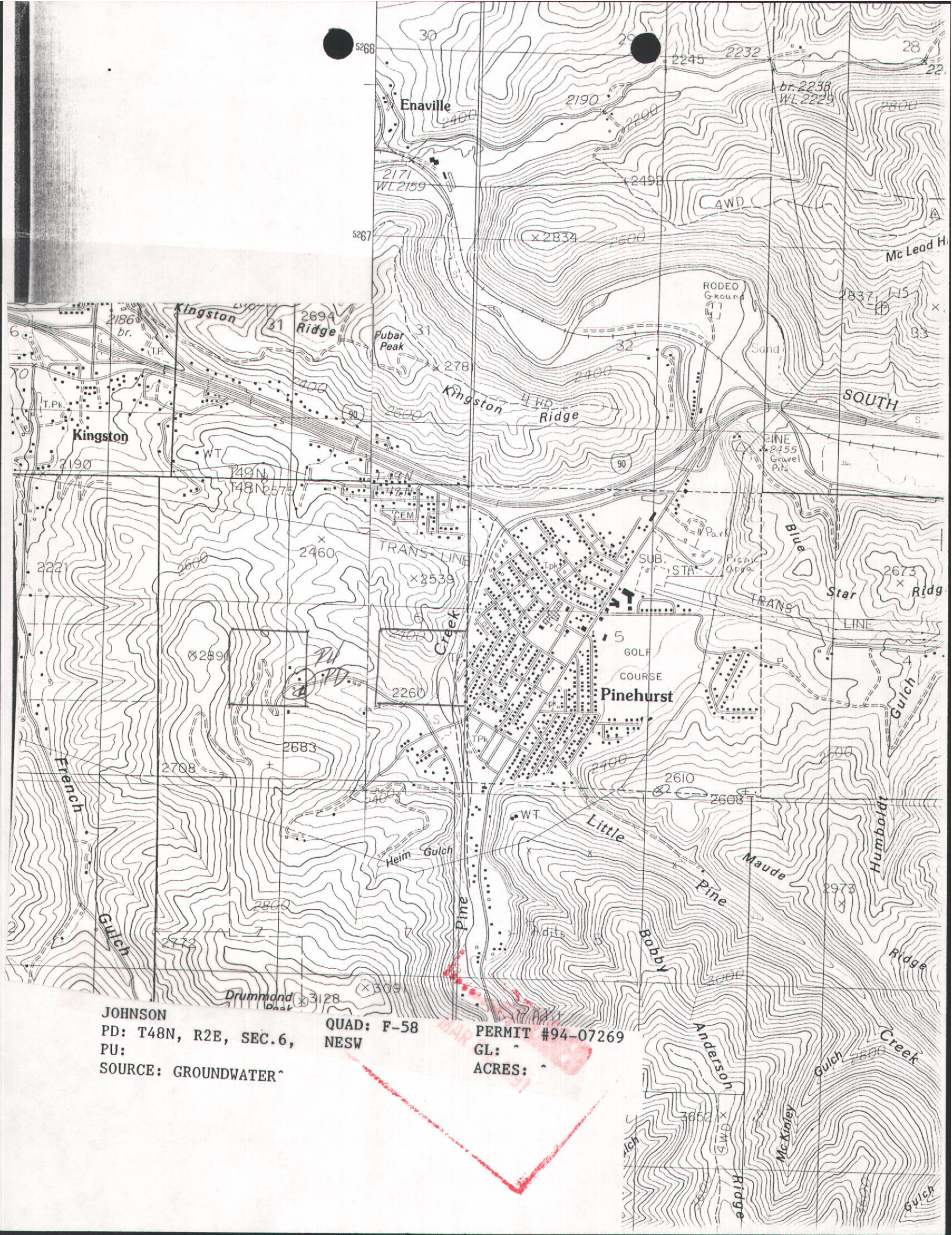
Indicate Method of Determination

Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
<i>43N</i>	<i>2E</i>	<i>10</i>									<i>S</i>								

Do not use this space

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MAR 4 1991



JOHNSON
PD: T48N, R2E, SEC. 6,
PU:
SOURCE: GROUNDWATER

QUAD: F-58
NESW

PERMIT #94-07269
GL:
ACRES:

Do not use this space

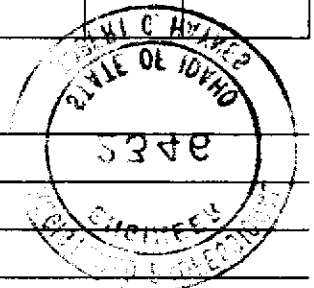
D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

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

2. Measurements:



E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

.02 cfs

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:

100 Chickens
5 pigs
2 horses

9 gpd
10
20
+ 24
54 gpd

54 gpd
x 365 days a year
19710.9 gpy

19710.9 gpy
325,828.8
0.06

MAR 22 1991

V=1

H. REMARKS AND OVERLAP REVIEW ANALYSIS

*Johnsons have a well for domestic use
and this well is only used for stock 9/1-7/89*

*Johnsons said the domestic water system
is taken from a different well.*

I. RECOMMENDATIONS

1. Recommended Amounts

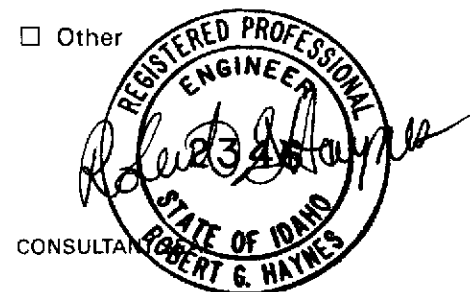
Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
<i>Stockwater</i>	<i>1-1</i>	<i>12-31</i>	<i>.02</i>	<i>0.06</i> TDK
Totals:			<i>.02</i>	<i>0.06</i> LA

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

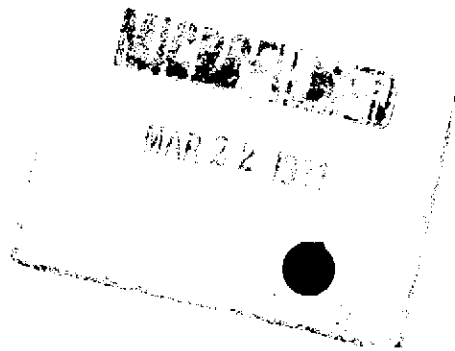
J. AUTHENTICATION

Field Examiner's Name *Charlotte Johnson*
 Signature *Charlotte Johnson*
 Certification Date *2/17/91*
 Field Report Preparation Date *July 28, 1989*



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

*SC
2/21/91*



State of Idaho
Department of Water Resources
WELL INSPECTION FORM

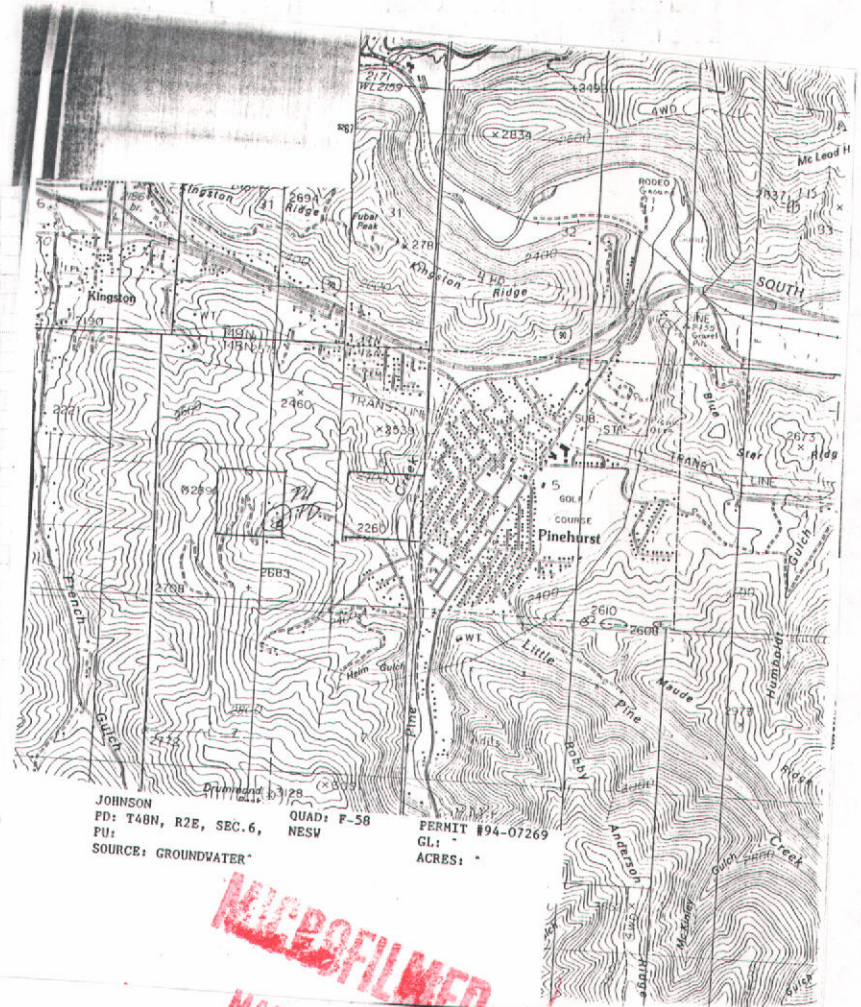
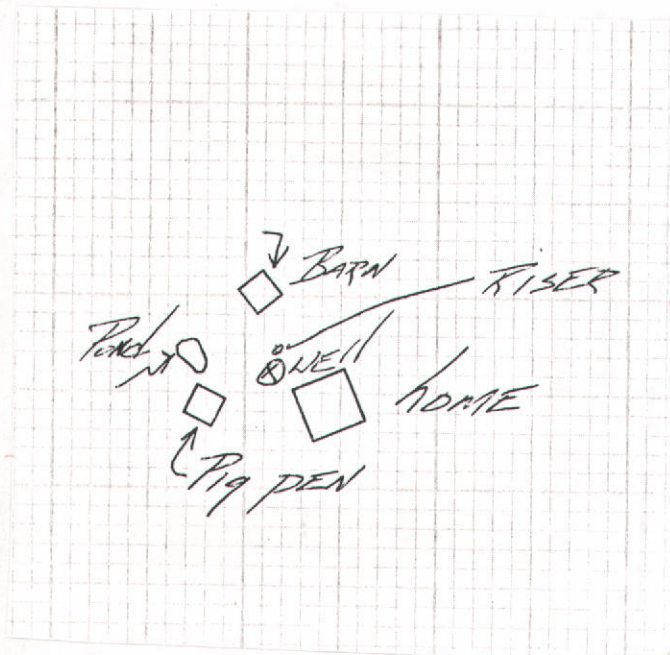
This form should be completed by the examiner when conducting a field examination to determine the extent of beneficial use of water from a well or whenever a well is inspected for other reasons. The form should be forwarded to Groundwater Protection Section in the State Office upon completion.

1. Legal Description of well location. Twp. 48N, Rge.: 2E,
Sec. 6, Qtr./Qtr. NE SW or Lot _____
2. Owner STEVEN JOHNSON
Address Box 845, City Pinehurst, State Id
3. Approx. date of well construction 5/84
Well Driller United Drilling
4. Casing: Diameter 6 in Condition good
5. Casing length above land surface 1 ft
6. Well depth (ft) 270 Flowing _____ Temp. _____
Access port YES
7. Condition of piping and valving _____
8. Evidence of well seal _____
9. Shut in pressure or static water level 25 ft
10. Evidence of leakage around the casing _____
11. Does well need repair _____
12. Comments _____

(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.



JOHNSON
FD: T48N, R2E, SEC. 6,
PU:
SOURCE: GROUNDWATER
QUAD: F-58
NESW
PERMIT #94-07269
GL:
ACRES: *

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MAR 22 1991

Inspected by

Markle Jensen

Date

2/28/89

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
COMMENCEMENT OF WORKS

Permit No. 94-7269 Pamela
Name(s) of Permit Holder(s): Robert A. Jacobsen or Jacobson
Post Office Address: Box 1200 Pinehurst Idaho 83850
Tel. No. 682-4228

- ☐ I hereby certify that construction of diversion works for the above referenced permit began on APRIL 30, 1984 (date) and I understand that I must continue to develop the water system with 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.

5/21/84

Date

Robert A. Jacobsen
Signature of Permit Holder

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 94-7269

Date: 10/13/88

General Considerations:

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

Source of Water:

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

Extent of Use and Rate of Diversion:

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

Measuring Device:

Y Is a measuring device or access port required?
N/A Has one been installed?
N/A Waiver or modification of measuring device requested

Remarks:

*Proof acceptable
Reinstate*

Y Priority Calculation:
Date proof received Sept. 30, '88 273
Date proof due Sept. 1, '88 - 244
No. of days late = 29
Priority date June 29, '83 + 180
NEW PRIORITY DATE July 28, '83 = 209

SEND FILES TO DATA ENTRY AND THEN TO MICROFILM

94-7267

Form 217
03/85RECEIVED
OCT 04 1988

RECEIVED

SEP 22 1988

STATE OF IDAHO

Department of Water Resources

DEPARTMENT OF WATER RESOURCES

Department of Water Resources
Northern District Office

PROOF OF BENEFICIAL USE

For Office Use Only
Fee Received _____
Date _____
Receipt # _____
Receipt by _____
Reviewed by 94
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. 94-7269Name(s) of Permit Holder: Steven D or Carla R JohnsonPost Office Address: P.O. Box 845 Pinehurst, Idaho83850 Telephone No. 682-4718Source of Water: Ground Water

Extent of Use:

Domestic _____ (number of households) Stockwater 20 Head (number and type of stock)Irrigation _____ (acres) Other/Remark Pigs and HorsesTotal rate and/or volume for which proof is submitted .08 cfs _____ acre-feetShow the date water was first diverted and beneficially used under this permit: June 1983Measuring Device: Required? ☐ Yes ☒ No
Installed? ☐ Yes ☒ No
Fee enclosed \$ -0- Not Applicable
(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:

Same as above
(Name) (Telephone Number)

(Address)

The above information is my true statement of the extent to which the above numbered permit holder(s) intend to develop the permit and I relinquish any undeveloped portion of the permit to the state of Idaho.

MICROFILMED

MAR 17 1989

Sept 29-1988
DateCarla R Johnson
Signature of Permit Holder (and title if appropriate)

To: File 94-7269

From: Groundwater Protection

Date: 11/3/88

Drilling Permit: X 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.

Log says drilled in '84
Owner says '83 ?

go.

MICROFILMED

MAR 17 1989

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

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

Packhurst

1. WELL OWNER Name <u>Robert Jacobson</u> Address <u>Box 1200 Packhurst 82838</u> Owner's Permit No. _____		7. WATER LEVEL Static water level <u>25</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 _____ Describe artesian or air pressure zones below																																	
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Air ☐ Other _____ <table border="1"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td><u>15.6 gpm</u></td> <td><u>285</u></td> <td><u>1 1/2</u></td> </tr> </table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>15.6 gpm</u>	<u>285</u>	<u>1 1/2</u>																										
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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">Sore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th rowspan="2">Water Yield</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>8"</td> <td>0</td> <td>5</td> <td>clay</td> <td>X</td> </tr> <tr> <td>5"</td> <td>5</td> <td>15</td> <td>Drainage gravel</td> <td>X</td> </tr> <tr> <td>6"</td> <td>15</td> <td>24</td> <td>Drainage gravel</td> <td>X</td> </tr> <tr> <td>6"</td> <td>24</td> <td>28</td> <td>gray shale</td> <td>X</td> </tr> </tbody> </table>		Sore Diam.	Depth		Material	Water Yield	From	To	8"	0	5	clay	X	5"	5	15	Drainage gravel	X	6"	15	24	Drainage gravel	X	6"	24	28	gray shale	X					
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		RECEIVED JUN 14 1984 Department of Water Resources																																	
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other <table border="1"> <thead> <tr> <th>Technique</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>250</u></td> <td>Inches <u>6</u></td> <td>Inches <u>1</u></td> <td>feet <u>270</u></td> </tr> <tr> <td></td> <td>Inches</td> <td>Inches</td> <td>feet</td> </tr> <tr> <td></td> <td>Inches</td> <td>Inches</td> <td>feet</td> </tr> <tr> <td></td> <td>Inches</td> <td>Inches</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"> <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 _____ ☒ Cemented ☐ Grouted ☐ Other _____ Sealing pressure used _____ Method of installation _____		Technique	Diameter	From	To	<u>250</u>	Inches <u>6</u>	Inches <u>1</u>	feet <u>270</u>		Inches	Inches	feet		Inches	Inches	feet		Inches	Inches	feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet		
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MICROFILMED

MAR 17 1989

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: LB

APPLICATION NUMBER: 94-7269

CHECK:

- ☒ Source.
☒ Point of diversion.
☒ County.
☒ Quantity of water and period of use.
☒ Description of diverting works.
☒ Time required for beneficial use of water.
☒ Place of use or acres irrigated.
☒ Map.
☒ Signature.
☒ Fee.
☐ Yes ☒ No Field check required.
☐ Yes ☒ No Critical groundwater area.
☐ Yes ☒ No Request dam safety information. Sent by: _____ Date: _____
☒ Yes ☐ No* In form to receipt.

Field check by: _____

Date: _____

Comments: _____

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: _____

SEND COPIES TO:

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

Copies sent by: _____ Date: _____

PROCESSING:

- ☐ Yes ☐ No Platted by: _____ Map No. _____
☐ Yes ☐ No Other rights on same place of use. _____
☒ Yes ☐ No* In form for advertising.
Final date for protests: 8/8/83
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 8/1/83
☒ Application published correctly. If not, record action taken: _____
☒ Fee amount, receipt date & number, recorded on application.
☒ Publication dates and paper, recorded on application.
☒ Protests, dates, withdrawal, etc., recorded on application.
☒ Recommendation & initial, recorded on application.
☐ Yes ☒ No Measuring device required.
☐ Yes ☒ No Access port required.
☐ Yes ☒ No Will water be delivered by watermaster? If yes, what district? _____
6/29/83 Date of priority recommended.
Special conditions of approval or cover letter. _____

STATE OFFICE REVIEW:

By: [Signature] Date: 9/1/83

L17 26
=

- ☐ See attached sheet for more information.

By: DRT Date: 9/9/83

RECEIVED
SEP 07 1983

Department of Water Resources