

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 93-07049

Priority: July 16, 1985

Maximum Diversion Rate:

0.22 CFS

This is to certify, that CITY OF TENSED

P.O. BOX 126

TENSED, ID 83870

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated July 5, 1985; and has submitted Proof of Beneficial Use on October 13, 1987. An examination indicates that the works have a diversion capacity of .220 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>
MUNICIPAL	01/01 to 12/31	0.22 CFS	

LOCATION OF POINT(S) OF DIVERSION:

NWNE , Sec. 14, Township 44N, Range 05W
BENEWAH County

PLACE OF USE: See Remarks

CONDITIONS/REMARKS:

1. This water right is appurtenant to the described place of use.
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.
4. Place of use is within the city limits of Tensed.

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 28th day of NOVEMBER, 1989.

Acting

R. Keith Higginson, Director

MICROFILMED

MAR 28 1990

BEFORE THE DEPARTMENT OF WATER RESOURCES
OF THE STATE OF IDAHO

IN THE MATTER OF PERMIT NO. 93-7049 IN THE)
NAME OF CITY OF TENSED, IDAHO) ORDER OF REINSTATEMENT
_____)

WHEREAS, the Department has issued the above-captioned permit with the condition that proof of construction of works and application of water to beneficial use be submitted on or before October 1, 1987; and,

WHEREAS, the Department has notified the permit holder by certified mail that proof was due and instructed the permit holder as to the steps to be taken to make said proof; and,

WHEREAS, on October 1, 1987 the permit lapsed for failure of the permit holder to submit proof of beneficial use together with the examination fee; 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 lapsing; and,

WHEREAS, the permit holder has provided a reasonable showing as to why said permit should be reinstated by submitting the proof of beneficial use and the examination fee on October 13, 1987;

IT IS, THEREFORE, HEREBY ORDERED that Permit No. 93-7049 be REINSTATED and the priority advanced to July 16, 1985.

Dated this 2nd day of November, 1987.

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MAR 17 1988

L. Glen Saxton

L. GLEN SAXTON
Chief, Operations Bureau

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

APPROVED

To appropriate the public waters of the State of Idaho

274-5482-MAYOR

1. Name of applicant City of Tensed, Idaho Phone (208) 274-2852

Post office address P.O. Box 126, Tensed, Idaho, 83870

2. Source of water supply groundwater which is a tributary of _____

3. Location of point of diversion is NW $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 14 Township 44N
Block 9 Desmet Townsite Plat
Range 5W B.M. Benewah County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

Amount 0.22 cfs for Municipal Water 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)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)

5. Total quantity to be appropriated:

a. 0.22 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. 10-inch well with pump and pumphouse dis-
charging into a ground level storage tank with booster pumps discharging into a water
distribution system

b. Height of storage dam N/A 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 10 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 2 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: _____ $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 14 Township 44N
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 _____

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

(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	

Total number of acres to be irrigated _____

c. Describe any other water rights used for the same purposes as described above. This municipal well is expected to replace individual wells as a primary source of domestic water within the City of Tensed

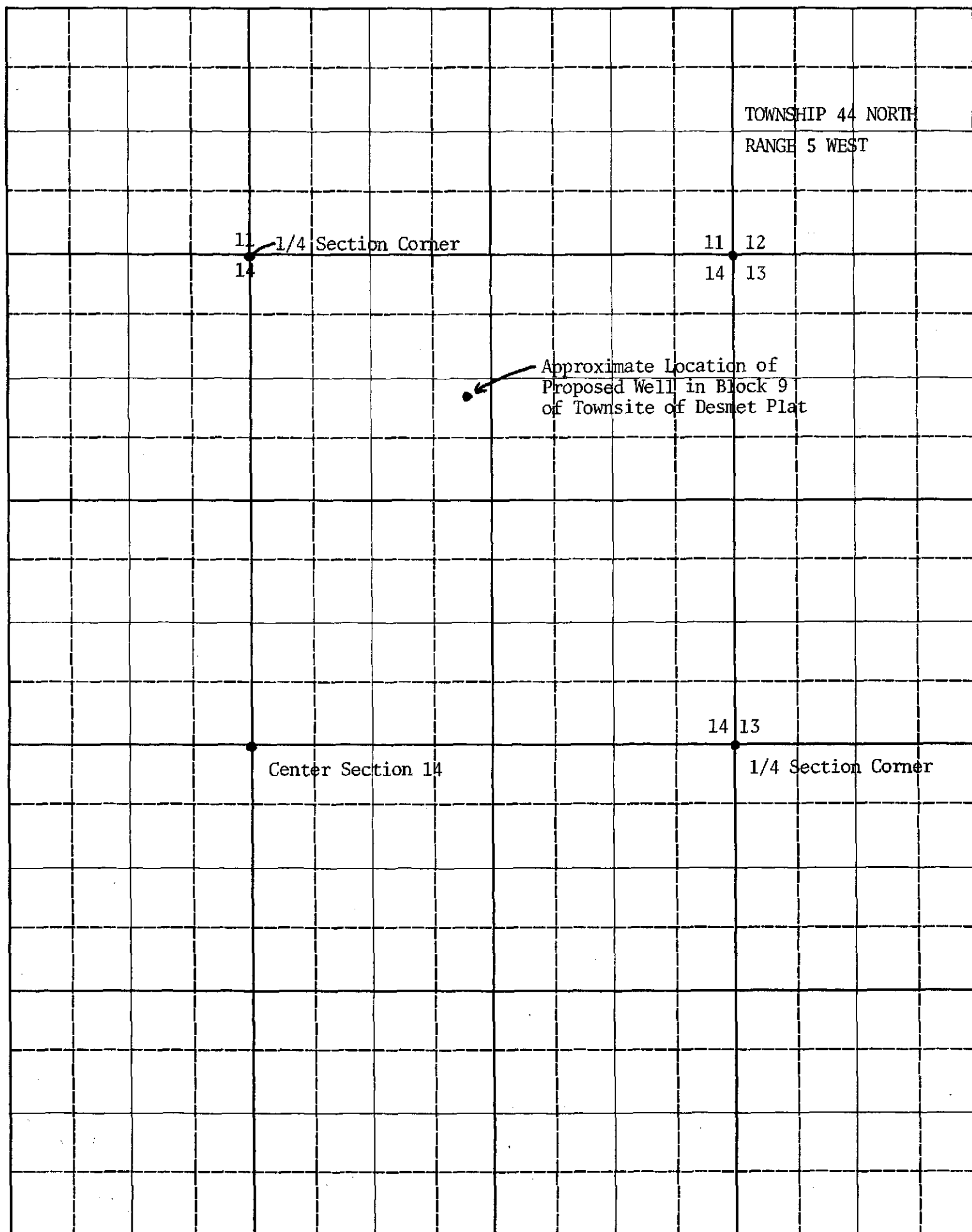
9. a. Who owns the property at the point of diversion City of Tensed

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

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.

Michael S. Jones
(Applicant)

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Proposed Priority 7/5/85

Received by [Signature] Date 7/16/85 Time 3:30 PM

Preliminary check by JK Fee \$ 45.00

Receipted by [Signature] Date 7/18/85 (31827)

Publication prepared by [Signature] Date 7/18/85

Published in St. Marie's Gazette Record

Publication dates 7/24 & 31/85

Publication approved [Signature] Date 8/19/85

Protests filed by: none

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by [Signature] kw

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. 93-7049, 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 October 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.
The issuance of this permit in no way grants any right-of-way or easement across the land of another.

Witness my hand this 26th day of September, 1985.

L. Glen Saxton
Chief, Operations Bureau

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

RECEIVED
JUN 26 1989

Department of Water Resources

PERMIT 93-7049

- Yes No
- (☒) () B/U Acknowledgement Letter Sent 12/8/87 (INITIAL & DATE)
- () (☒) Aerial Photo Date Requested _____ by _____
- (☒) () Quad Sheet
- () (☒) GL Plat
- () () Copies of overlapping License Field Report Claim
- () () Photo PD/PU
- () () Correspondence (Date) _____
- () () Other (List) _____

EXAM COMPLETED BY Travis Suber DATE 8/88

SR AGENT REVIEW JK DATE 8/88

REGIONAL MANAGER REVIEW PWA DATE 6/89

ENTERED ON COMPUTER BY JK DATE 6/14/89

PRELIMINARY OVERLAP REVIEW BY JK DATE 1-88

(☒) NO OVERLAP ~~FOUND~~

NEW WELL NO OVERLAP REVIEW PERFORMED



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MAR 28 1990

93-7049

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No. 93-7079

1. Owner: City of Tensed Phone No. (208) 274-2851

Current Address: P.O. Box 126, Tensed, Idaho 83870

2. Accompanied by: Mildred Synold EXAM. DATE: 8/8/88

Address: Box 35 Tensed Id Phone No. Same

Relationship to Permit Holder: ex-mayor

3. Source: groundwater tributary to —

B. OVERLAP REVIEW

1. Other water rights with same place of use: SEE SUPPLEMENT

☐ Copies Attached

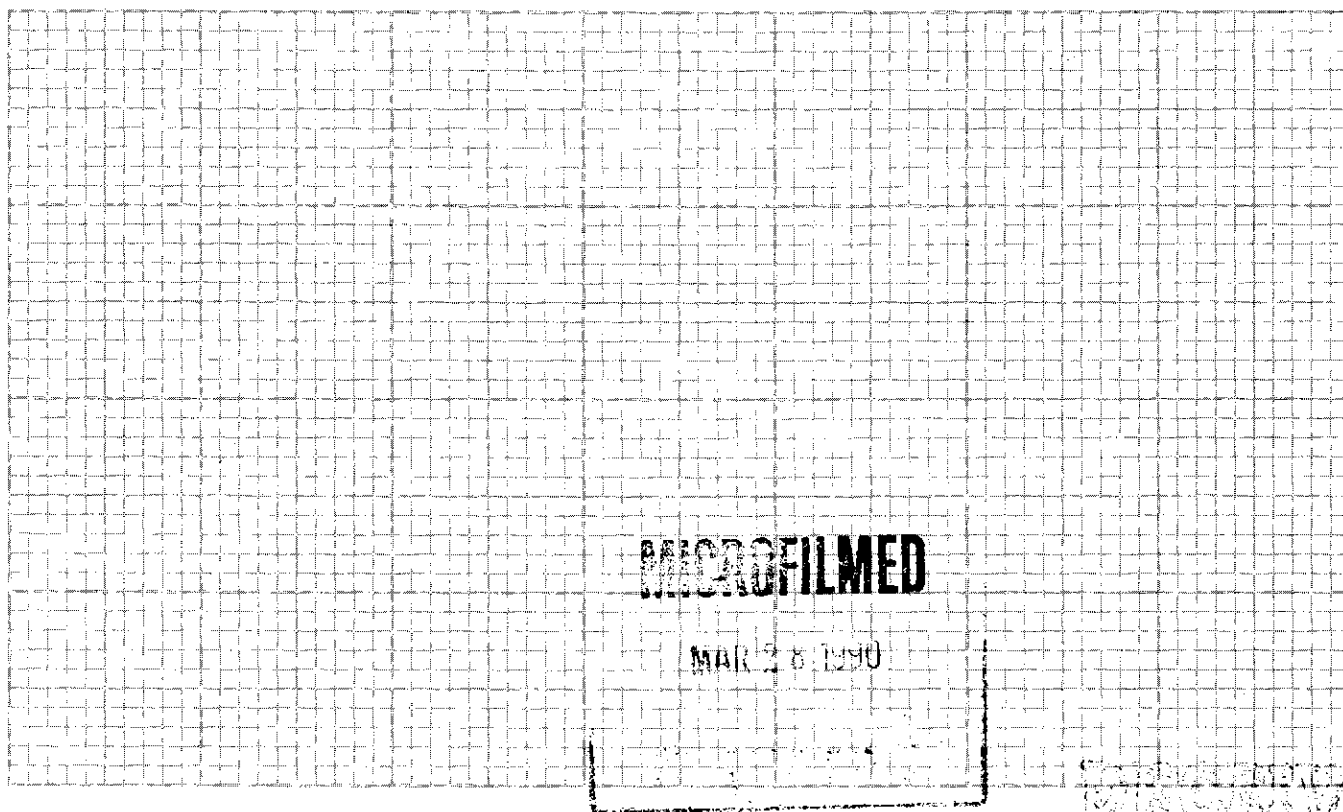
2. Other water rights with same point of diversion: SEE SUPPLEMENT

☐ 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" = _____

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

☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater.

☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).

Department of Water Resources

System Description (continued)

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

A 14" diameter well at 290' depth with a submersible pump fills a Standpipe Reservoir which then gravity feeds the city of Tensed with water. Storage tank is 200,000 gal. 60 Homes and other hook ups made.

☐ 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	5hp			

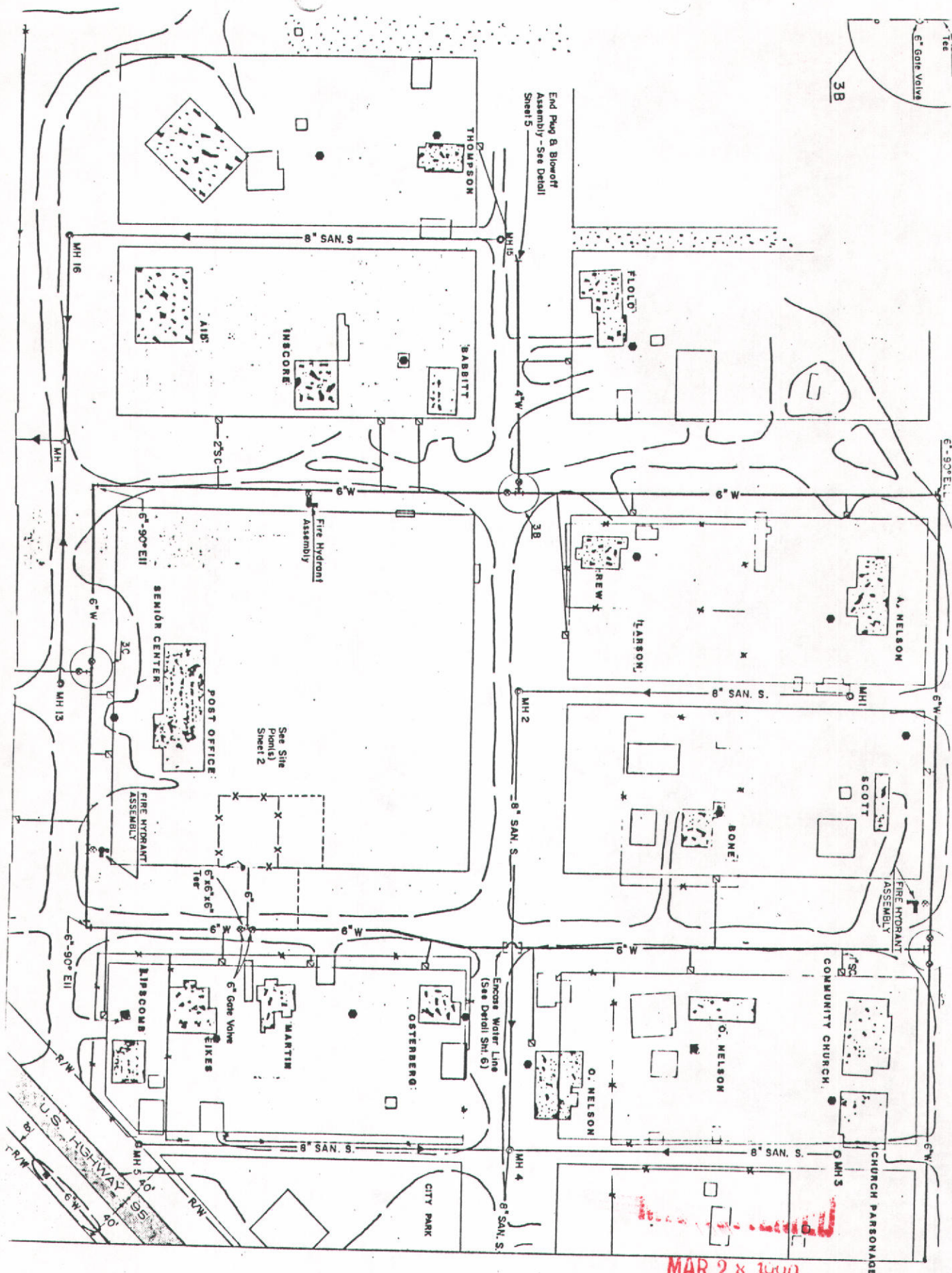
*Code to correspond with No. on map and aerial photo

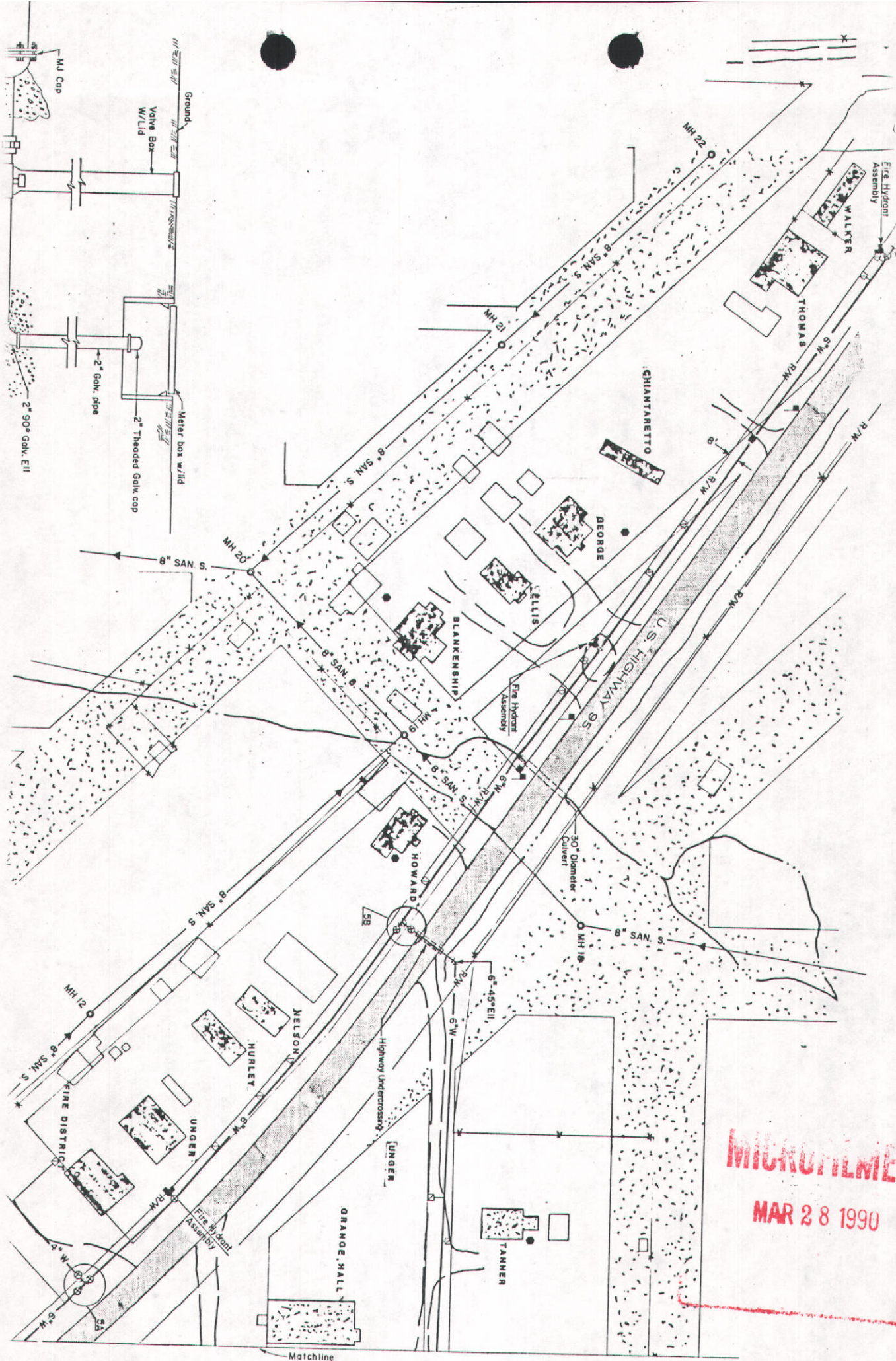
5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
			NW	NE	14	44N	5W	Bernewh	Map

6. Place(s) of Use: CITY LIMITS OF TENSED Indicate Method of Determination Map

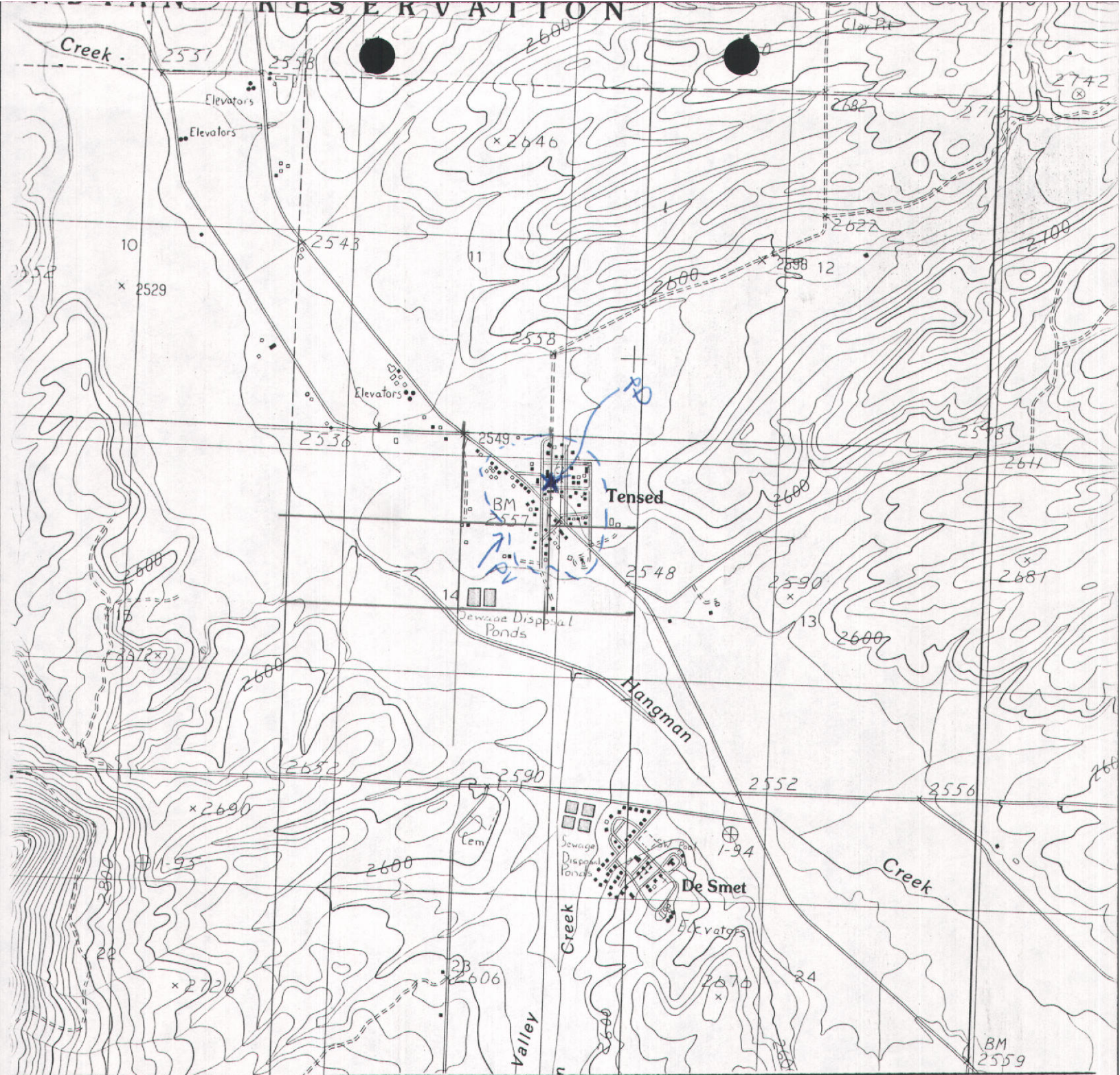
Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
44N	5W	14		M															





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MAR 28 1990



PERMIT HOLDER CITY OF TENSED PERMIT # 93-7049

P D TWP 44N RGE 6W SEC 14 NW/4E

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P/U TWP RGE SEC CITY

MAR 28 1990

SOURCE GW TRIBUTARY TO

MAP PLOT 16 IRR. ACRES USGS QUAD H-3 SCALE 8 1/2'

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

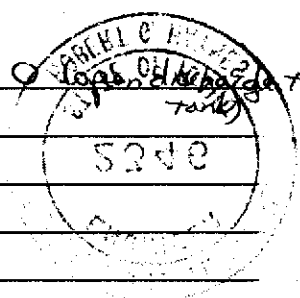
Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date

2. Measurements:

$$Q = \frac{8.8(E)(H_p)}{2.31(p) + H}$$

$$E = .8 \quad H_p = 5 \quad H = 90' \quad P = 0$$

$$Q = .39 \text{ cfs}$$



E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

$$Q = .39 \text{ cfs}$$

.22 MAX / PERMIT JK

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:

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = \underline{\hspace{2cm}}$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = \underline{\hspace{2cm}}$$

$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = \underline{\hspace{2cm}}$$

2. Volume Calculations for Other Uses:

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MAR 22 1980

H. REMARKS AND OVERLAP REVIEW ANALYSIS

ALL water rights within the city limits have become stand by.

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
Municipal	1/1	12/31	^{JK} 22 ~~39~~	
Totals:			22.39 cfs JK	

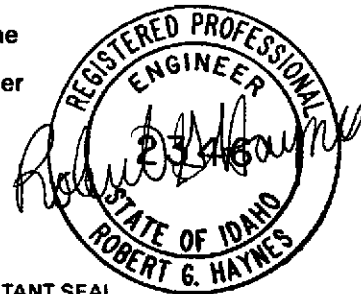
2. Recommended Amendments

- ☐ 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 Louis Sukoraty
Signature Louis Sukoraty
Certification Date 5/15/89
Field Report Preparation Date 8/8/88

CONSULTANT SEAL



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

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MAR 28 1990

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. 44N, Rge. 5W,
Sec. 14, Qtr./Qtr. NW NE or Lot _____
2. Owner City of Tensed
Address P.O. Box 126, City Tensed, State Id
3. Approx. date of well construction 7/86
Well Driller CDA Drilling
4. Casing: Diameter 14" to 10" at 39' Condition good
5. Casing length above land surface 1 1/2'
6. Well depth (ft) 240 Flowing _____ Temp. _____
Access port No
7. Condition of piping and valving good
8. Evidence of well seal Yes
9. Shut in pressure or static water level 8'
10. Evidence of leakage around the casing No
11. Does well need repair No
12. Comments NONE

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MAR 28 1990

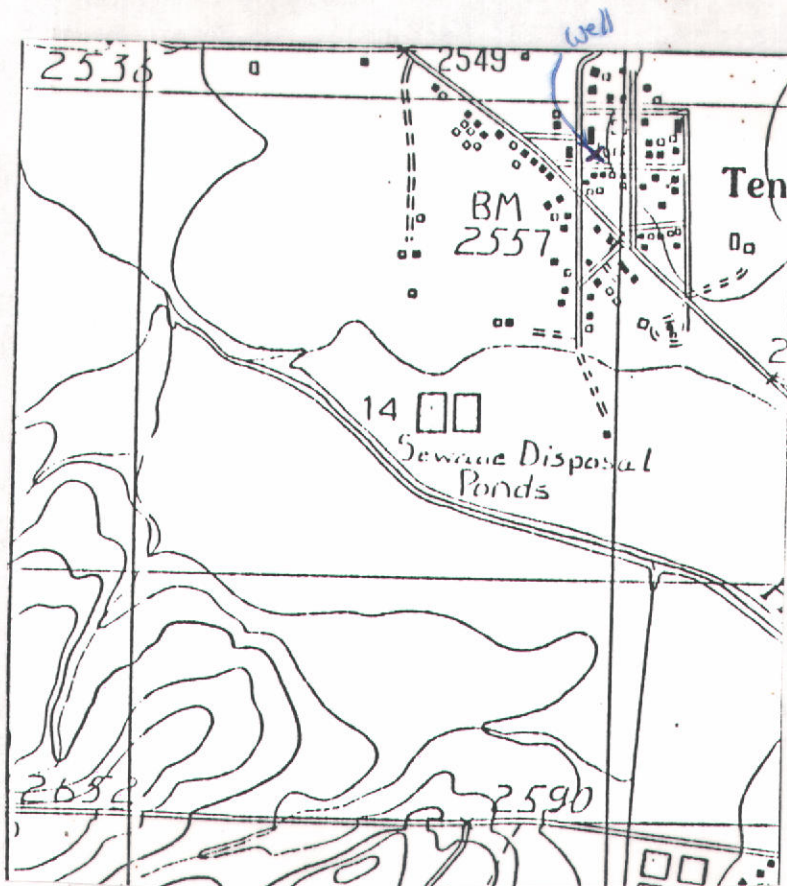
(OVER)

JUN 26 1989

Department of Water Resources

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.



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MAR 28 1990

Inspected by Louis J. Howard

Date 8/8/88

CALCULATION OF NEW PRIORITY DATE

FROM: RITA FLECK

TO: FILE # 93-7049

DATE: 10-29-87

Date proof received

286 Oct. 13, 1987

Proof due

-274 Oct 1, 1987

Number of day proof late

12

Priority date

+186 July 5, 1985

New priority date

197 July 16, 1985

Remarks:

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MAR 26 1990

RECEIVED

OCT 13 1987

RECEIVED

STATE OF IDAHO

AUG 17 1987

DEPARTMENT OF WATER RESOURCES

Department of Water Resources

For Office Use Only
Fee Received \$100.00
Date 10-13-87
Receipt # 45338
Receipt by [Signature]
Reviewed by [Signature]
Sent to region

PROOF OF BENEFICIAL USE

Department of Water Resources

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. 93-7049
Name(s) of Permit Holder: CITY OF TENSED
Post Office Address: Box 126 Tensed Ida 83870
Telephone No. 274-2851

Source of Water: ARTISIAN

Extent of Use:

Domestic 60 (number of households) Stockwater (number and type of stock)
Irrigation (acres) Other/Remark

Total rate and/or volume for which proof is submitted 100 GPM cfs acre-feet

Show the date water was first diverted and beneficially used under this permit: 3-1-1987

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

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

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

LEROY Osterberg 274-2833
(Name) (Telephone Number)

Tensed Ida
(Address)

The above information is my true statement of the extent to which the above number has been developed and I relinquish any undeveloped portion of the permit to the state of Idaho.

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MAR 17 1988

8-13/87
Date

Mildred Sykes - Mayor
Signature of Permit Holder (and title, if appropriate)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTTYPEWRITER 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 CITY OF TENSED
Address TENSED IDAHO
Owner's Permit No. _____

7. WATER LEVEL

Department of Water Resources

Static water level 8 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 Good
Describe artesian or temperature 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 _____

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>220</u>	<u>67'</u>	<u>4 hr</u>
<u>100</u>	<u>22'</u>	<u>1 hr</u>

3. PROPOSED USE

- ☐
- Domestic
- ☐
- Irrigation
- ☐
- Test
- ☒
- Municipal
-
- ☐
- Industrial
- ☐
- Stock
- ☐
- Waste Disposal or Injection
-
- ☐
- Other _____ (specify type)

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water Yes/No
	From	To		
<u>14</u>	<u>0</u>	<u>1</u>	<u>Topsoil</u>	
<u>14</u>	<u>1</u>	<u>20</u>	<u>Brown clay</u>	
<u>14</u>	<u>20</u>	<u>24</u>	<u>Small Gravel</u>	
<u>14</u>	<u>24</u>	<u>39</u>	<u>Dark Brown Clay</u>	
<u>10</u>	<u>39</u>	<u>95</u>	<u>Dark Brown Clay</u>	
<u>10</u>	<u>95</u>	<u>110</u>	<u>Hard Pan Clay</u>	
	<u>110</u>	<u>190</u>	<u>Dark Brown Clay</u>	
	<u>190</u>	<u>192</u>	<u>Hard Pan Clay</u>	
	<u>192</u>	<u>230</u>	<u>Black Clay</u>	X
	<u>230</u>	<u>238</u>	<u>Broken Basalt</u>	X
	<u>238</u>	<u>288</u>	<u>Hard Basalt</u>	
	<u>288</u>	<u>290</u>	<u>BROKEN Basalt</u>	X
			<u>First water at 222 - 25</u>	
			<u>Cased OFF</u>	
			<u>Second water at 235</u>	
			<u>20 gpm</u>	
			<u>Third water at 288</u>	
			<u>Main water supply</u>	

4. METHOD DRILLED

- ☒
- Rotary
- ☐
- Air
- ☐
- Hydraulic
- ☐
- Reverse rotary
-
- ☐
- Cable
- ☐
- Dug
- ☐
- Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
<u>250</u> inches	<u>14</u> inches	<u>1</u> feet	<u>39</u> feet
<u>250</u> inches	<u>10</u> inches	<u>1</u> feet	<u>230</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ 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 40' Material used in seal: ☒ Cement grout☒ Bentonite ☐ Pudding clay ☐ _____Sealing procedure used: ☐ Slurry pit ☒ Temp. surface casing☐ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

Weld

☐ Cemented between strata

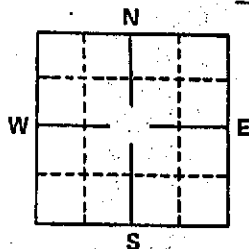
Describe acc. port

MAIN WATER SUPPLY

Work started 6/22/86 finished 7/12/86

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.



Subdivision Name

Lot No. _____ Block No. _____

County Peoria
 1/4 NE 1/4 Sec. 14, T. 44 N/S. R. 5 E/W.

Firm Name CDA Drilling Firm No. 214

Address Box 206 Ketchikan Date _____

Signed by (Firm Official)

and
(Operator) *Paul L. H.*

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

MACROFILM

MAR 17 1988

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: re

APPLICATION NUMBER: 93-7049

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: re

Date: 8/20/85

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: August 12, 1985
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 8/19/85
☐ 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? _____
7/5/85 Date of priority recommended.
Special conditions of approval or cover letter. _____

MICROFILMED

per Sec. of States office. 9/4/85 - city has not
filed incorporation - fw
9/4/85 PER BENEWAH COUNTY AUDITOR - INCORPORATED
(HAS ABILITY TO LEVI TAXES)

RECEIVED

SEP 16 1985

By: re

Date: 8/19/85

STATE OFFICE REVIEW:

L17

2604

Department of Water Resources

RECEIVED

AUG 27 1985

- ☐ See attached sheet for more information.

By: fw

Date: 9/25/85

Department of Water Resources



STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

NORTHERN REGION

A. Kenneth Dunn
Director

Suite No. 9
4055 Government Way
Coeur d'Alene, Idaho 83814
(208) 765-4639

July 8, 1985

City of Tensed
P. O. Box 126
Tensed, Id. 83870

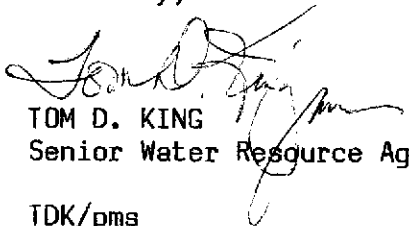
Gentlemen:

This office is in receipt of your Application for a Permit and Check No. 92-212 in the amount of \$45.00 and we are returning same to you because the application cannot be formally receipted until the following information is provided:

1. Item No. 3 - Legal description of Point of Diversion shown as NENE, Section 14.
2. Item No. 11 - Map shows Point of Diversion in NWNE Section 14.

Please note that your application has been initialed and dated as being received on July 5, 1985. If the requested information is provided with 30 days of the date of this letter, your date of priority will be maintained.

Sincerely,



TOM D. KING
Senior Water Resource Agent

TDK/pms

Enc. - Appln.

RECEIVED

JUL 16 1985

Department of Water Resources
Northern District Office

MICROFILMED



STATE OF IDAHO DEPARTMENT OF WATER RESOURCES

NORTHERN REGION

A. Kenneth Dunn
Director

Suite No. 9
4055 Government Way
Coeur d'Alene, Idaho 83814
(208) 667-6484

July 8, 1985

City of Tensed
P. O. Box 126
Tensed, Id. 83870

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TDK/pms

Enc. - Appln.

MICROFILMED