

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 92-07088

Priority: May 22, 1981 Amount: 0.02 CFS 1.2 AFA

This is to certify, that PHILLIP R. ROBINSON
BETTY J. ROBINSON

RT. 4 BOX 241

ST. MARIES, ID 83861

has complied with the terms and conditions of the permit issued pursuant to Application for Permit dated May 22, 1981, and has submitted proof to the Department of Water Resources on June 10, 1982, that water has been applied to a beneficial use; an examination by the Department indicates that the works have a diversion capacity of .020 cfs of water from:

SPRING tributary to SINKS

source and that a water right has been established as follow:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>VOLUME</u>
DOMESTIC	01/01 to 12/31	0.02 CFS	1.2 AFA

LOCATION OF POINT OF DIVERSION(S): SWNW , Sec. 25, Township 44N, Range 03W
BENEWAH County

PLACE OF USE: DOMESTIC

TWN RGE SEC

44N 03W 25 SWNW

CONDITIONS/REMARKS:

1. The right to the use of 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.

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 16th day of August, 1988.

Director

RECEIVED

AUG 18 1988

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 Phillip R. or Betty J. Robinson Phone 245-3694
Post office address Rt #4, Box 213, St. Maries, Id 83861
2. Source of water supply Springs (2) which is a tributary of sinks
3. Location of point of diversion is SW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Section 25 Township 44N
Range 3W B.M. Benewah County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

Amount 0.02 for Domestic purposes from 1-1 to 12/31 - telcon. with Mrs. Robinson (both dates inclusive) ms
(cfs or acre-feet per annum) 12/31 5/29/81

Amount 0.02 for Stock purposes from 1-1 to 1-31 (both dates inclusive)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)

5. Total quantity to be appropriated:

- a. 0.04 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

- a. Description of ditches, flumes, pumps, headgates, etc. (2) Developed Springs with gravity flow to 6'x6' reservoir & hence by pump and pipeline to place of use
- 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 1 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: SW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Section 25 Township 44N
Range 3W 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 10 mixed

- (4) Name of municipality to be served _____, or number of families to be supplied with domestic water 1.

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

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RANGE

[illegible]

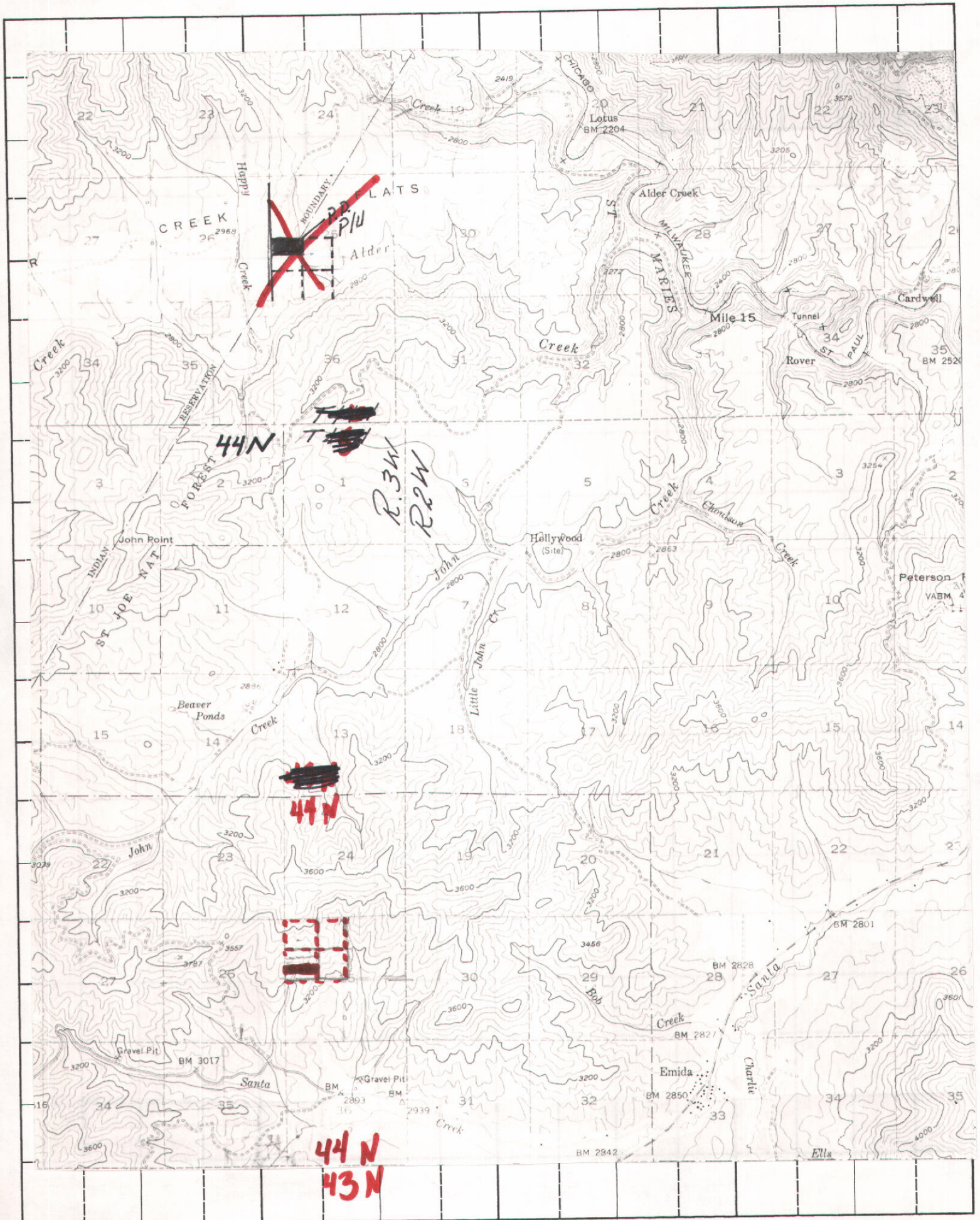
Total number of acres to be irrigated

- 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 Applicant
- b. Who owns the land to be irrigated or place of use Applicant
- 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: 1 inch equals 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.

x Philly R. Robinson
(Applicant)

MICROFILMED

Proposed Priority

5/22/81

MICROFILMED

Received by me Date 5/22/81 Time 12:30pm

Preliminary check by LO Fee \$ 30.00

Receipted by me Date 5/27/81 (18155)

Publication prepared by me Date 5/27/81

Published in St. Marie Angelle Record

Publication dates 6/3 + 18/81

Publication approved me Date 6/15/81

Protests filed by: none

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by RA HC

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. 92-7088, and said application is hereby approved.

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

- SUBJECT TO ALL PRIOR WATER RIGHTS.
- Proof of construction of works and application of water to beneficial use shall be submitted on or before August 1, 19 82.
- 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.
- Other: _____

Witness my hand this 16th day of July, 19 81.

Norman C. Young
Administrator, Resources Admin. Div.

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 92-07088

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BENEWAH County

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TWN RGE SEC

44N 03W 25 SWNW

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Director

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
LICENSING REPORT

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AUG 22 1985

92-7088
Permit No.

Department of Water Resources

1. Measurement Calculations

- a) Field Measurement Calculations (Include theoretical capacities and system capacity)

Domestic: $Q_{max} = 0.04 cfs$

$Q_{app} = 0.02 cfs$

$\therefore Q = 0.02 cfs$

- b) Volume Calculations for Irrigation:

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

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

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

- c) Volume Calculations for Other Uses:

$V_{dom} = 1.2 AFA$

2. Overlap Review

- a) Other water rights with same place of use: _____

- b) Other water rights with same point of diversion: _____

- c) Analysis:

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RECOMMENDED AMOUNTS

3.	Permit No.	Priority	Amount	App. Date	Date Proof Submitted	System Capacity
	92-7088		0.02 cfs	5/22/81		

4. Permit Holder: Phillip R. or Betty J. Robinson

Address: RT4 Box 213, St Maries, Id 83861

5. Source: Spring tributary to Sinks

6. Beneficial Use	Period of Use From	To	Rate of Diversion Q (cfs)	Annual Volume V (afa)
<u>Domestic</u>	<u>1/1</u>	<u>12/31</u>	<u>0.02</u>	<u>1.2</u>

Allowable Maximums: 0.02 1.2

7. Point(s) of Diversion:

No.	Govt. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County
			<u>SW</u>	<u>NW</u>	<u>25</u>	<u>44N</u>	<u>3W</u>	<u>Beneva</u>

8. Place(s) of Use

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	3W	25							X										
Total Acres _____																			

Total Acres _____

9. Recommended Conditions/Remarks: _____

10. Recommended Amendments

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- ☐ 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

11. Examiner's Signature L Beard

Date 8/8/85

Checked in Regional Office by B. Holmes

Date 8/14/85

Approved in State Office by _____

Date _____

Permit No. 92-7088

Phone No. 245-3694

1. Owner: Phillip R or Betty J. Robinson Phone No. 245-3694
Current Address: Rt 4 Box 241 St Marks Id 83861

2. Accompanied by: _____ EXAM. DATE: 8/7/85
Address: _____ Phone No. _____

Relationship to Permit Holder:

3. Source: Spring tributary to Sinks

Well/Diversion* No.	Motor Make	HP	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size

*Code with points of diversion, system diagram & photos on reverse side. Disregard if only one.

5. **System Description** (As operating at time of measurement. Indicate pressure, number of sprinklers, etc.)

Spring developed w/ 6" cnp installed vertically
w/ submersible pump and pipeline to
single family domestic use. No stock

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

7. Measurements ☐ Additional data/computation sheets attached

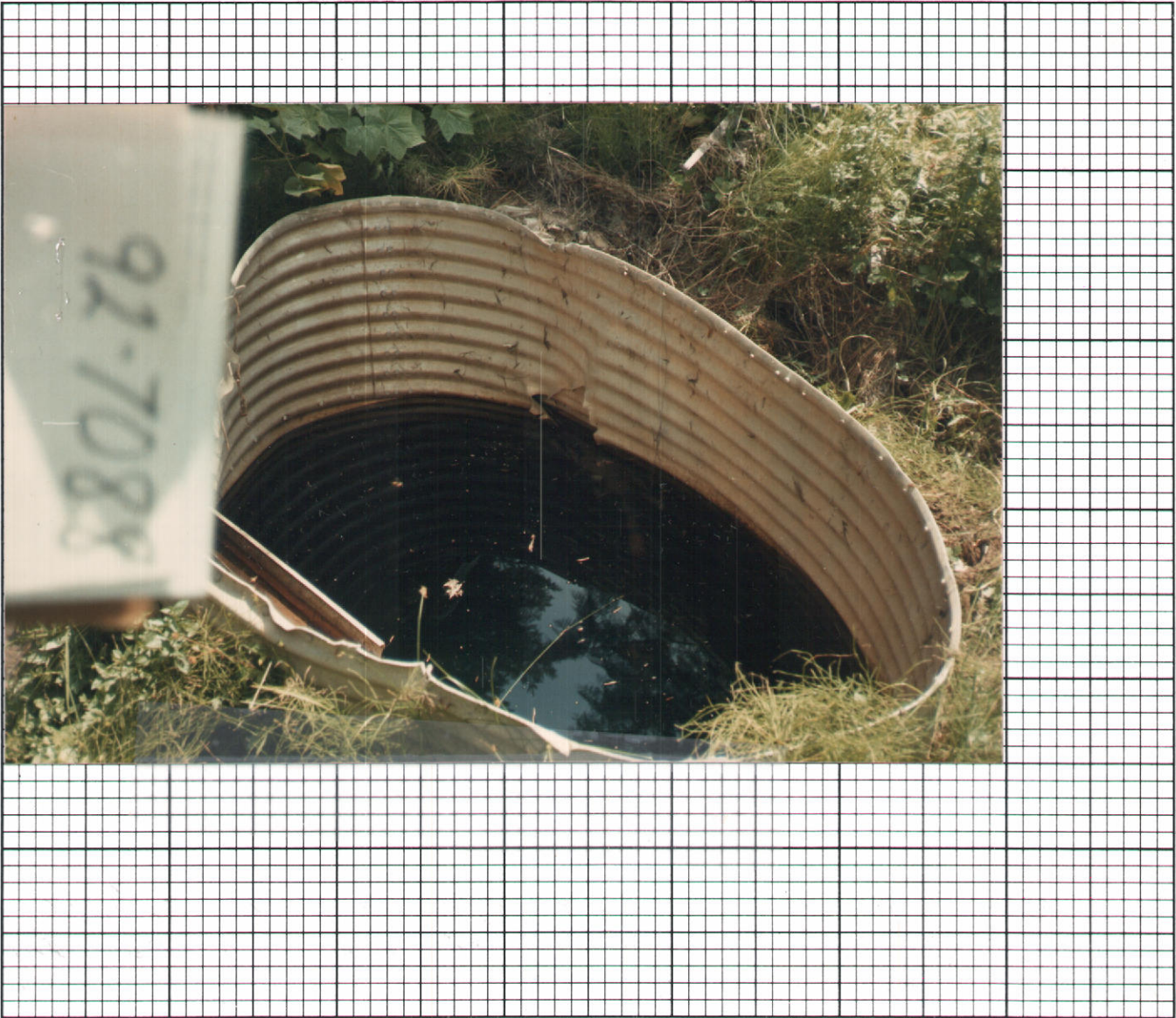
8. Point(s) of Diversion:	Indicate Method of Determination
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[illegible]

9.	Place(s) of Use:	Irrigation - give acres served by system at time of exam. Indicate Method of Determination
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[illegible]

10. Other water rights on these lands None
11. Other water right diverted from same p.d. None
12. **Diversion and Delivery System Diagram:** Indicate all major components and distances between components. Indicate ditch size/pipe i.d. as applicable. Indicate on systems with measurement port the distance between the port and the nearest component/pipe bend/restriction both upstream and downstream, and the inside pipe diameter at the measurement port. On multiple diversion systems indicate how diversion systems are connected.



13. ☒ **Photo of Diversion & System Attached**
- ☐ **Aerial Photo of Place of Use Attached or Map of Irrigated Acreage Attached**

14. Remarks

15. 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

16. Examiner's/Consultant's Signature L Beard

Date 8/7/85

Consultant's License Number

IDWR Director's Authorization to Conduct

Beneficial Use Examination

Date

CONSULTANT SEAL

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AUG 18 1988



DEPARTMENT OF WATER RESOURCES

The Idaho Department of Water Resources will consider this card as a statement that the permit holder(s) has completed development to the extent shown below of Permit No. 92-7088.

Name(s) of Permit Holder: Phillip R. + Betty J. Robinson

Post Office Address: RT 4 Box 241

ST MARIES IDA 83861 Tel. No. 208-245-369

Source of Water: UNNAMED SPRING

Extent of Use:

☒ Domestic	<u>1</u>	(number of households)
☒ Stockwater	<u>6 calves</u>	(number and type of stock)
☐ Irrigation		(acres)
☒ Other	<u>garden water</u>	

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

Access Port: Required? ☐ Yes ☒ No Installed? ☐ Yes ☐ No

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

6-10-82
Date

Phillip R Robinson
Signature of Permit Holder

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: LB APPLICATION NUMBER: 92-7688

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.

Field check by: _____

Date: _____

Comments: _____

- ☒ 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.

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: _____

SEND COPIES TO:

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

PROCESSING:

- ☐ Yes ☐ No Platted by: _____ Map No. _____
☐ Yes ☐ No Other rights on same place of use. _____
☒ Yes ☐ No* In form for advertising.
Final date for protests: 6/22/81 ✓
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 6/12/81 ✓
☒ 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? _____
☒ 5/22/81 Date of priority recommended.
Special conditions of approval or cover letter. _____

By: RyH Date: 6/25/81

STATE OFFICE REVIEW:

Return receipt w/ cover letter
SLW/ocord

☐ See attached sheet for more information.
By: RyH Date: 7/2/81

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