

[illegible]

Method of Determination:

3. ☒ Delivery System Diagram Attached (required). Indicate all major components and distances between components. Indicate weir size/pipe as applicable.
- ☒ Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.
- ☒ Aerial Photo Attached (required for irrigation of 10+ acres).
- ☒ Photo of Diversion and System Attached

4.

<u>Well or Diversion ID No.*</u>	<u>Motor Make</u>	<u>Hp</u>	<u>Motor Serial No.</u>	<u>Pump Make</u>	<u>Pump Serial No. or Discharge Size</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

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

D. FLOW MEASUREMENTS

1.

<u>Measurement Equipment</u>	<u>Type</u>	<u>Make</u>	<u>Model No.</u>	<u>Serial No.</u>	<u>Size</u>	<u>Calib. Date</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

2. Measurements: **Bucket Measurement = 5 gallons in 30 sec or 0.02cfs**

E. FLOW CALCULATIONS

Measured Method: **Bucket**

_____ Additional Computation Sheets Attached

F. 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: **In house = 0.6 AF Irrigation****G. NARRATIVE/REMARKS/COMMENTS : This system is a gravity feed to the home and is use for irrigation of the yard.**

Have conditions of permit approval been met? ____Yes ____No

H. RECOMMENDATIONS

1. Recommended Amounts

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>DIVERSION RATE</u>	<u>ANNUAL VOLUME</u>
DOMESTIC	01/01 to 12/31	0.020 CFS	0.6 AF
<u>Totals:</u>		0.020 CFS	0.6 AF

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

I. AUTHENTICATION

Field Examiner's Name

Date

Reviewer

Date

E. J. [Signature] *6-5-2008*
[Signature] *6/9/8*

Delivery System Diagram

98-9396



S 23 T 49 N R 4 W

Legend

-  place of use
-  Right POD
-  Township/Range
-  Sections
-  QQ

0 25 50 100 150 200 Meters



95-9396



S 23 T 49N R 4W

Legend

 place of use

 Right POD

 Township/Range

 Sections

 QQ

0 25 50 100 150 200 Meters





Home- Irrigation.JPG



Tank.JPG



Spring .JPG

95-9396



95-9396





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