

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 95-9481

Exam Date: 4-8-08

1. Current Owner: EAST SNOWY LANE WATER ASSN
PO BOX 831
BAYVIEW ID 83803
(208)683-2205
2. Accompanied by: JOHN
Phone No: SAME AS ABOVE
Address: SAME AS ABOVE
Relationship to Permit Holder: PRESIDENT

3. SOURCE TRIBUTARY
GROUND WATER

B. OVERLAP REVIEW

1. Other water rights with the same place of use: NONE
2. Other water rights with the same point of diversion: NONE

C. DIVERSION AND DELIVERY SYSTEM**1. LOCATION OF POINT(S) OF DIVERSION:**

GROUND WATER NW¼SE¼ Sec. 14, Twp 53N, Rge 03W, B.M. KOOTENAI County

Method of Determination:

2.

PLACE OF USE: DOMESTIC

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
53N	03W	14													X	X			

PLACE OF USE: IRRIGATION

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
53N	03W	14													3.8	4.2			8.0

Total Acres: 8

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.

Well or Diversion

<u>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>
00017830	U/K	4.5	U/K	U/K	U/K

*Code 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:

E. FLOW CALCULATIONS

____ Additional Computation Sheets Attached

Measured Method:

PUMP EQUATIONS WATER RIGHT					
No.			95-9481		
	HP	H in feet	Efficiency as a decimal	Pumping lift in feet	System pressure in PSI
Q = $HP \cdot 8.8 \cdot \text{Eff} / H$	4.5	468.952381	0.8	388	35
Q =	0.068 cfs 30.4 gpm				

F. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 8 \times 3 = 24.0$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation season}) \times 1.9835 = .07 \times 214 \times 1.9835 = 29.7$$

$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 24.0$$

2. Volume Calculations for Other Uses:

$$.6 \times 4 = 2.4$$

$$\begin{array}{r} 24.0 \\ + 2.4 \\ \hline 26.4 \text{ AF total} \end{array}$$

G. NARRATIVE/REMARKS/COMMENTS

This right is for domestic of 4 homes each home was found to have 2 acres of irrigation. The well has a 4.5 hp pump and the tag number on the well is D0017830.

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	0.070 CFS	2.40 AF
IRRIGATION	04/01 to 10/31	0.070 CFS	24.00 AF
<u>Totals:</u>		0.070 CFS	26.40 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

4-22-08

5/8/8

Form 238-7
7/98Starships Consulting and
Management Services

RECEIVED

IDAHO DEPARTMENT OF WATER RESOURCES

OCT 29 2001 WELL DRILLER'S REPORT

IDWR/North

1. WELL TAG NO. D0017830

Drilling Permit No. _____

Other IDWR No. 271294

2. OWNER

Well Number: _____

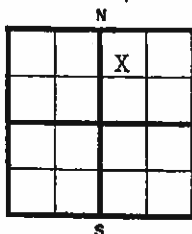
Name LARRY SPENCER

315

Address 10276 CAMP COURTCity HAYDEN State ID Zip 83835

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

Twp. 53 ☒ North or ☐ SouthRge. 3 ☐ East or ☒ WestE Sec. 8 NW 1/4 NE 1/4 1/4Gov't Lot _____ County KOOTENAI

Lat. : : Long. : :

Address of Well Site SNOWY LANECity ATHOL

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Bk. _____ Sub. Name _____

4. USE:

☐ Domestic ☒ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement, etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	50	8 BAGS	TEMP. CASING

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) _____Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	437	.250	STEEL	☒	☐	☒	☐

Length of Headpipe 5' Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____
☒ Screens Screen Type JOHNSON S.S.

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
437	442	50		5	S.S.	☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

388 ft. below ground Artesian pressure _____ lb.Depth flow encountered 388 ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
20			2 HRS

Water Temp. COLD Bottom Hole Temp. COLDWater Quality test or comments: CLEARDepth first Water encountered 388

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
				Y	N
12	0	3	Top Soil	☐	☐
12	3	8	Sand & Gravel	☐	☐
12	8	16	Sand, Gravel & Cobble	☐	☐
12	16	39	Sand Gravel & Boulders	☐	☐
12	39	50	Sand & Gravel	☐	☐
8	50	116	Sand & Gravels	☐	☐
8	116	125	Gravels & Boulders	☐	☐
8	125	316	Sand & Gravels	☐	☐
8	316	328	Sand, Gravels, & Boulders	☐	☐
8	328	388	Sand & Gravel	☐	☐
8	388	442	Sand & Gravel	☒	☐

Completed Depth 442 (Measurable)Date: Started 10/1/01 Completed 10/4/01

13. DRILLER'S CERTIFICATION

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

Firm Name H2O WellService, Inc. Firm No. 448Firm Official Todd Morgan Date 10-12-01

and

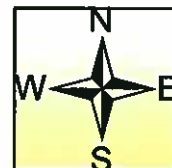
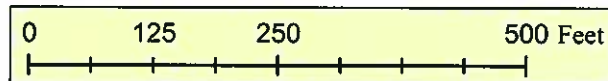
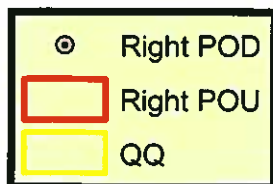
Supervisor or Operator Todd Morgan Date 10-10-01

(Sign Once if Firm Official and Operator)

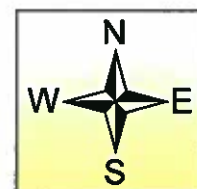
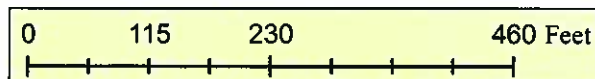
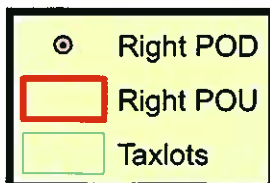
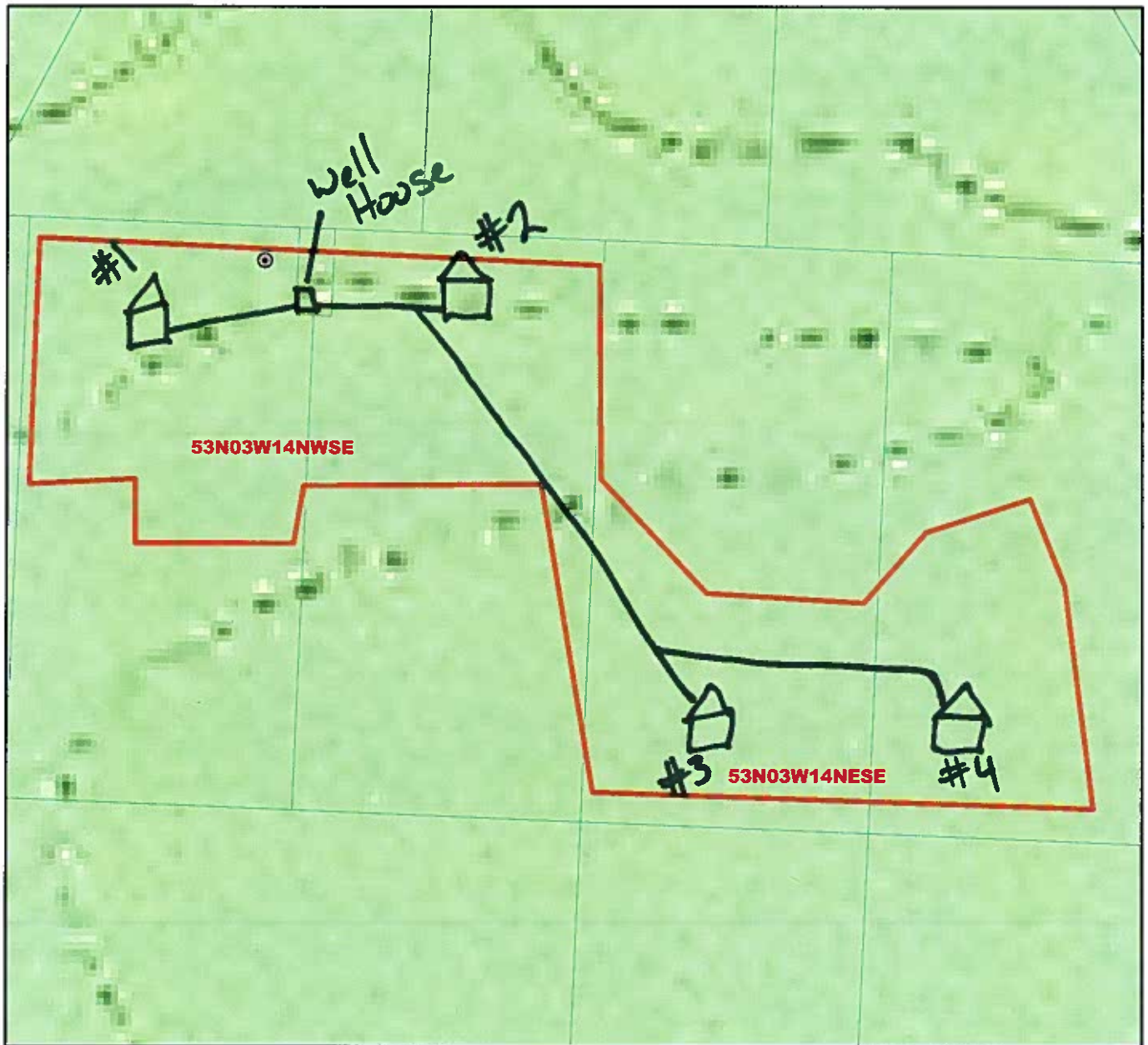
Todd Morgan

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DOMESTIC #1



DOMESTIC #2



DOMESTIC #4 AND
IRRIGATION



DOMESTIC # 3 AND
IRRIGATION



IRRIGATION



POINT OF DIVERSION



WELL HOUSE



WELL TAG

95-9481



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