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MAR 27 2008

DEPT. OF WATER RESOURCES
SOUTHERN REGION

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY

Amt. of Fee \$: N/A
Receipt No.: N/A
Receipt By: N/A
Date Received: N/A

The Idaho Department of Water Resources considers this form a statement that the permit holder(s) has completed all work that will occur for the development of a water right and that water has been applied to beneficial use(s) to the extent described below. **This form must be accompanied by a license examination fee, when necessary, or accompanied by a completed Beneficial Use Field Report prepared by a certified water right examiner.** If you no longer own the property and want to convey this permit to the new owner, please complete an Assignment of Permit form and send it to the Department with a \$25.00 filing fee. Assignment forms are available from any Department office or at www.idwr.idaho.gov.

1. Permit No. 47-17462 Telephone No. (208) 788 4576
2. Name of Permit Holder(s): MARY FANE HUCK & OR LAWRENCE L. HUCK
3. Mailing Address: P.O. Box 3969 City HAILEY
State ID Zip 83333 Email: _____
4. Source of Water: GROUND If **GROUND WATER** (well), Date Drilled: mo. AUG / yr. 2007
Well Driller: EATON DRILLING & PUMP Drilling Permit Number: 848033
5. Extent of use(s) completed (as authorized by the water right permit):
Domestic (No. of households): 1 Stockwater (No. and type of stock): NONE
Irrigation (No. of acres): 1/2 AC Other: _____
6. Total rate of diversion or storage volume for which proof is submitted: 0.04 cfs OR _____ acre-feet.
7. Compliance with a Measuring Device requirement and/or other Conditions of Permit: *(Refer to the approval conditions on your permit and respond accordingly.)*

Measuring Device: Is a measuring device required?
If yes, has the measuring device been installed?

Yes ☐	or No ☒
Yes ☐	or No ☒

Conditions of Permit: Does your permit require you to submit additional information in connection with your proof of beneficial use? (If yes, please list the conditions below and provide documents if necessary.)

Completed?

Yes ☐ or No ☒

Completed?

Yes ☐ or No ☒

8. Fee Enclosed: \$ N/A (See Fee Schedule on back of the instructions for filing proof of beneficial use.
Proofs filed without an appropriate fee, will be considered incomplete.)

9. Person to contact to accompany the Department representative during field examination of the water system.

Name: LAWRENCE L. HUCK Telephone Number: 208 (788-4576)
Mailing Address: P.O. Box 3969 City HAILEY
State ID Zip 83333 Email: _____

10. **The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to a beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.**

Signature of permit holder: Lawrence L. Huck
(include your title, if on behalf of company or organization)

Date: 3/27/08

Form 238-7
11/97 JGEIDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
1/4 _____	1/4 _____	1/4 _____	
Lat : : _____	Long: : : _____		

1. WELL TAG NO. D 0044853

DRILLING PERMIT NO. 849033

Other IDWR No. _____

2. OWNER:

Name Kyle Castle Contractor

Address 144 Little Wood Rd

City Carey

State ID Zip 83320

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

	Twp. 11	North ☐ or South ☒
	Rge. 18	East ☒ or West ☐
	Sec. 20	1/4 NW 1/4 NE 1/4
	Gov't Lot _____	County Twin Falls
Lat: 42.27.507		Long: 114.22.302
Address of Well Site approx 3459 E 3180 N		
City Kimberly		

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

Lt. 60 Blk. _____ Sub. Name Ph.1 Pleasant Valle

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		
Bentonite	0	18	200lbs.	Dry pour

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	18	1/4	steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe 2'

Length of Tailpipe 18'

9. PERFORATIONS/SCREENS:

- ☐ Perforations
☐ Screens

Method

Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

70' ft. below ground

Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control

devices: Wellcap

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11. WELL TESTS:

- ☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
30			

Water Temp. <85

Bottom hole temp. <85

Water Quality test or comments: _____

Depth first Water Encounter 54'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
8	0	6	Top soil	Y N
8	6	8	broken black lava	
8	8	18	medium black lava	
6	18	35	medium black lava	
6	35	41	ash medium soft black lava	
6	41	42	medium black lava w/ breaks	
6	42	45	medium black lava w/ clay	
6	45	54	medium lava black	
6	54	58	breaks medium black lava	X
6	58	61	medium black lava	
6	61	63	medium black lava w/ ash	
6	63	73	medium black lava	
6	73	83	medium soft red lava	
6	83	86	medium soft black lava	
6	86		med. soft red lava w/	
		92	breaks	X
6	92	102	medium lava	
6	102	104	cinders	X
6	104	125	medium lava	
6	125	138	med soft lava w/ breaks	
6	138	142	breaks cinders	X
6	142	150	medium lava	
6	150	168	medium hard lava	
6	168	174	medium soft lava	
6	174	179	sand stone	X
6	179	184	sand stone	X

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 SEP 05 2007
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Completed Depth 184'

(Measurable)

Date: Started 8/24/2007

Completed 8/25/2007

13. DRILLER'S CERTIFICATION:

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

Company Name Eaton Drilling & pump Service, Inc.

Firm No. 26

Firm Official

Date 8/29/2007

and

Driller or Operator

Date 8/29/2007

(Sign once as Firm Official & Operator)