

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 95-9340

Exam Date: 8/1/2007

1. Current Owner: DAVID LINDSAY
252 GARNET DR
ST MARIES ID 83861-9101
(208)245-9407
2. Accompanied by: DAVID LINDSAY
Phone No: SAME AS ABOVE
Address: SAME AS ABOVE
Relationship to Permit Holder: SELF

- | 3. <u>SOURCE</u> | <u>TRIBUTARY</u> |
|------------------|------------------|
| 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 L3 NE1/4NW1/4 Sec. 2, Twp 46N, Rge 03W, B.M.
BENEWAH County

Method of Determination: GPS

2.

PLACE OF USE: DOMESTIC

[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</u> <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</u> <u>Size</u>
91-94-N-7	U/K	1.0	U/K	U/K	U/K
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

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

D. FLOW MEASUREMENTS

1.

<u>Measurement</u> <u>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: 5 gal in 30 sec
10 gpm
0.02 cfs

E. FLOW CALCULATIONS

____ Additional Computation Sheets Attached

Measured Method:

PUMP EQUATIONS					
WATER RIGHT No.			95-9340		
	HP	H in feet	Efficiency as a decimal	Pumping lift in feet	System pressure in PSI
Q = $HP \cdot 8.8 \cdot \text{Eff} / H$	1	269.0816327	0.7	165	45
Q =	0.023 cfs	10.3 gpm			

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:

$$.6 \text{ domestic} + .6 \text{ dom irrigation} = 1.2 \text{ AF total}$$

G. NARRATIVE/REMARKS/COMMENTS

THIS SYSTEM USES GROUND WATER FOR DOMESTIC USES. THE WELL HAS A 1.0 HP PUMP AND A STATIC WATER LEVEL OF 165 FT. A MEASUREMENT OF 5 GALLONS IN 30 SECONDS WAS TAKEN DURING THE FIELD EXAM.

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	1.20 AF
<u>Totals:</u>		0.020 CFS	1.20 AF

2. Recommended Amendments

☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☒ None

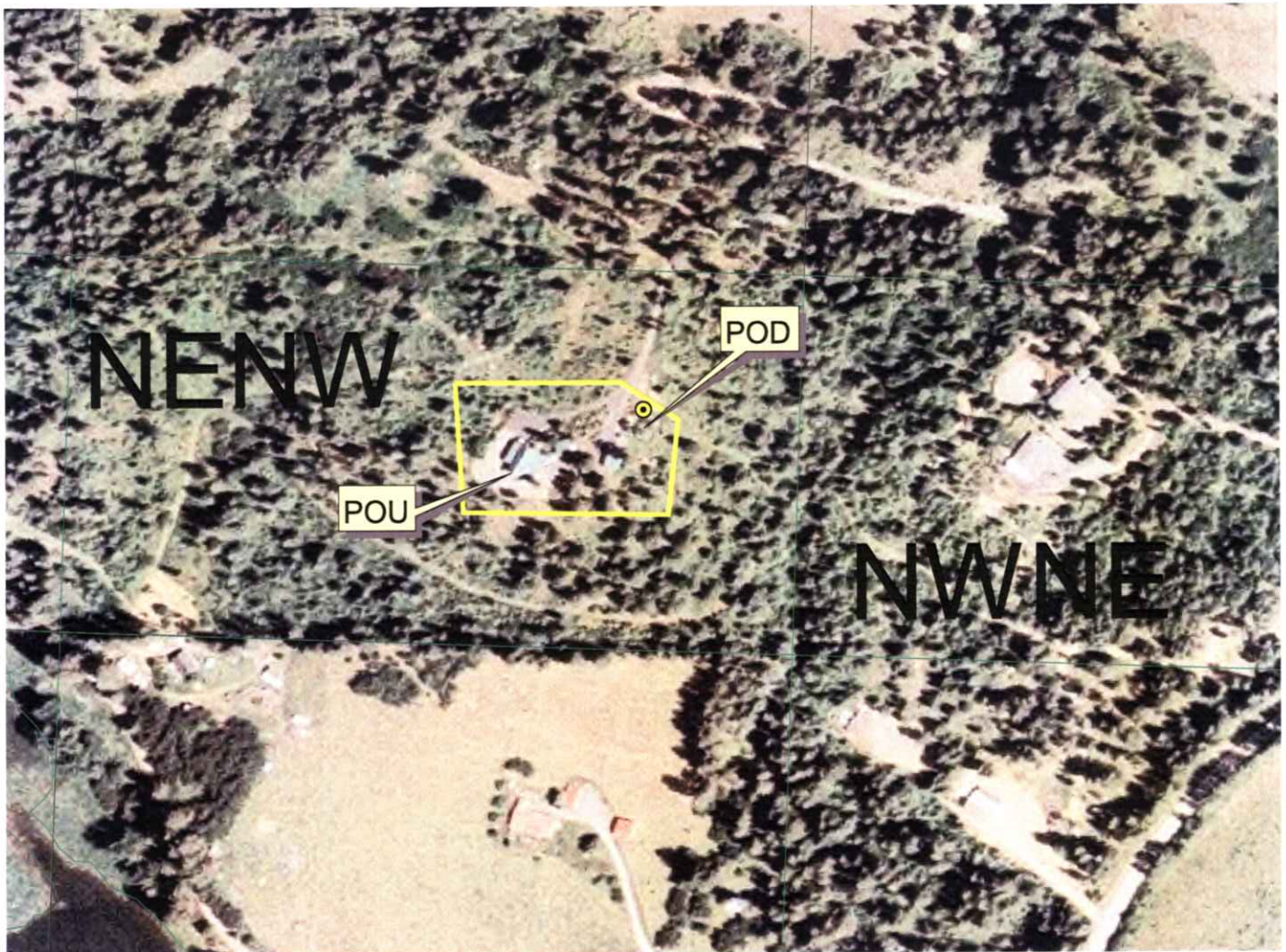
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

I. AUTHENTICATION

Field Examiner's Name [Signature] Date 9-6-07

Reviewer [Signature] Date 2/10/7

95-9340



0.1 0 0.1 0.2 Miles

-  Benewah taxlots
-  GCDB47N03W GCDB
-  GCDB46N03W GCDB
-  Right POD
-  Pou.shp
-  Pod.shp
-  Administrative BasinsAdminbas.shp



IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter
or
Ball Point Pen

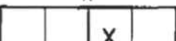
1. DRILLING PERMIT NO. 91 - 94. N-7 - 070
Other IDWR No. Well closed See suffix 100

2. OWNER:

2. OWNER: DAVID O. LINSAY
Name
Address 16 SUNSET CIRCLE
City BETTENDORF State IA Zip 52722

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.


 Twp. 46N North ☒ or South ☐
 Rge. 3W East ☐ or West ☒
 Sec. 2 1/4 **NW** 1/4 **NE** 1/4
 Gov't Lot _____ County SHOSHONE

MISSION POINT

Address of Well Site MISSION POINT

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

Lt. _____ Blk. _____ Sub. Name _____

4. PROPOSED USE:

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

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	18	4	OVERBORE

Was drive shoe used? Y ☒ N ☐

Was drive shoe seal tested? Y ☐ N ☒ How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8"	+2	18	.250	STEEL	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____

☐ Screens Screen Type _____

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

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

165 ft. below ground Artesian pressure lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

NW NE Z 40N 3W

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
5GPM EST.			1 HR.

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments:

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

[illegible]

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 UNITED DRILLING INC. Firm No. 414

Firm Official Sam V. Callis, Jr. Date 7-25-94

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

95-9340



MEASUREMENT



PLACE OF USE 1



PLACE OF USE 2



PLACE OF USE 3



POINT OF DIVERSION

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