

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 95-9297

Exam Date: 7/27/2007

1. Current Owner: PAUL ROBERGE
17222 N SMITH AVE
HAUSER ID 83854-5580
(208)773-6671

Or

JOYCE ROBERGE
17222 N SMITH AVE
HAUSER ID 83854
(208)773-6671

2. Accompanied by: JOYCE ROBERGE

Phone No: SAME AS ABOVE

Address: SAME AS ABOVE

Relationship to Permit Holder: SELF

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 SYSTEM1. LOCATION OF POINT(S) OF DIVERSION:

GROUND WATER

NW1/4SE1/4

Sec. 6, Twp 51N, Rge 05W, B.M.

KOOTENAI County

Method of Determination: GPS

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	
51N	05W	6														X			

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>
95-95-N-0052	U/K	1	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:

4 gallons in 30 seconds

8gpm

E. FLOW CALCULATIONS

____ Additional Computation Sheets Attached

Measured Method:

PUMP EQUATIONS					
WATER RIGHT No.			95-9297		
	HP	H in feet	Efficiency as a decimal	Pumping lift in feet	System pressure in PSI
$Q = \frac{HP \times 8.8 \times \text{Eff}}{H}$	1	308.5170068	0.8	216	40
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 home + 6 irrigation = 1.2 AF total

G. NARRATIVE/REMARKS/COMMENTS

THIS SYSTEM USES GROUNDWATER FOR DOMESTIC USE OF ONE HOME INCLUDING IRRIGATION OF LESS THAN 1/2 ACRE.

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

Date

Reviewer

Date

8-28-07

9/4/7

95-9297



0.03 0 0.03 0.06 Miles

-  Kootenai taxlots
-  GCDB51N05W GCDB
-  Right POD
-  Pou.shp



POSTED

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter
or
Ball Point Pen

1. DRILLING PERMIT NO. 95 - 95 - N - 0052 - 000
Other IDWR No. _____

2. OWNER:

Name ROSENBERG, PAUL & JOYCE
Address 9310 N THREE FORKS ROAD
City POST FALLS State ID Zip 83854

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.


 Twp. 51 North ☒ or South ☐
 Rge. 05 East ☐ or West ☒
 Sec. 08 1/4 NW 1/4 SE 1/4
 Gov't Lot _____ County ROCKWELL

Address of Well Site

(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	

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 39'

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	138	.250	STEEL	☒	☐	☒	☐
4	+2	560	.180	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ ~~P~~erforations Method **SKILL SAW**

☐ ~~S~~creens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Line
520	580		60	4	PVC	☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

NWSE 6 5/N 5W

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
30+			45 MIN

Water Temp. COLD Bottom hole temp. _____

Water Quality test or comments: **CLEAN**

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]Completed Depth **500** (Measurable)

Date: Started **06/01/95** Completed **06/05/95**

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 WELL SERVICE, INC.** Firm No. **448**

Firm Official John Wheeler Date 05/12/95

and
Supervisor or Operator Mark L. Lee Date 05/12/95

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES



PLACE OF USE 1



PLACE OF USE 2



SYSTEM



WELL

95-9297



95-9297





95-9297

