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MAY 08 2007  
73566 IDWR/North

Receipt No. N018346  
Received By [Signature]  
Date 5/8/07

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES

# APPLICATION FOR AMENDMENT OF A PERMIT

Applicant LONE MOUNTAIN WATER ASSOCIATION Phone (208) 699-8084

Address P.O. Box 1074, Rathdrum, Idaho 82858

I am the owner and holder of Permit to Appropriate the Public Waters of the State of Idaho No 95-9247, and request that the permit and permit map be amended and/or changed as follows:

Purpose of Amendment: Change point of diversion X Add point of diversion  
Change place of use Change nature of use Change period of use Other

1. Point of diversion: 1/4 SE 1/4 SW 1/4, Section 2, Township 52N, Range 4W, B.M.,  
County of Kootenai. Other points of diversion SE 1/4 SW 1/4 Sec, 2m Twp 52N  
Rge 04W, B.M.

2. Period and nature of use: (irrigation, domestic, stockwatering, industrial, etc )

Amount 0.9 for Municipal purposes from 01/01 to 12/31 (both dates inclusive)  
(cfs or acre feet per annum) (water use) (Begin month) (End month)

Amount            for            purposes from            to            (both dates inclusive)  
(cfs or acre feet per annum) (water use) (Begin month) (End month)

Amount            for            purposes from            to            (both dates inclusive)  
(cfs or acre feet per annum) (water use) (Begin month) (End month)

3. Place of use or land to be irrigated:

| T<br>w<br>p | R<br>g<br>e | S<br>e<br>c | NE 1/4 |    |    |    | NW 1/4 |    |    |    | SW 1/4 |    |    |    | SE 1/4 |    |    |    | TOTALS |
|-------------|-------------|-------------|--------|----|----|----|--------|----|----|----|--------|----|----|----|--------|----|----|----|--------|
|             |             |             | NE     | NW | SW | SE | NE     | NW | SW | SE | NE     | NW | SW | SE | NE     | NW | SW | SE |        |
| 52N         | 04W         | 2           |        |    |    |    |        |    |    |    |        |    | X  | X  |        |    | X  |    |        |
|             |             |             |        |    |    |    |        |    |    |    |        |    |    |    |        |    |    |    |        |
|             |             |             |        |    |    |    |        |    |    |    |        |    |    |    |        |    |    |    |        |
|             |             |             |        |    |    |    |        |    |    |    |        |    |    |    |        |    |    |    |        |
|             |             |             |        |    |    |    |        |    |    |    |        |    |    |    |        |    |    |    |        |
|             |             |             |        |    |    |    |        |    |    |    |        |    |    |    |        |    |    |    |        |
|             |             |             |        |    |    |    |        |    |    |    |        |    |    |    |        |    |    |    |        |
|             |             |             |        |    |    |    |        |    |    |    |        |    |    |    |        |    |    |    |        |

Total number of acres to be irrigated = 60

4 a. Who owns the property at the point of diversion? LONE MOUNTAIN WATER ASSOCIATION INC.

b. Who owns the land to be irrigated at the place of use?           

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing:

Show 1/4 1/4, section, township, range and ditches. (the smallest subdivision represents 40 acres)

Scale: 2 inches equal 1 mile

Signed this 5th day of MAY, ~~XX~~ 2007

## ACTION OF THE DEPARTMENT OF WATER RESOURCES

Published in CAAPress Publication dates 6/7 + 14/07

I, \_\_\_\_\_ of the Department of Water Resources hereby

Witness my hand this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

# 95-9247



-  Active Permit POD
-  Kootenai taxlots
-  GCDB53N04W GCDB
-  GCDB52N04W GCDB
-  Application POD
-  Application POU
-  Pou.shp
-  Administrative BasinsAdminbas.shp





# IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D D 0039876

DRILLING PERMIT NO 827932

Water Right or Injection Well No. 95-0247

838097

## 2. OWNER:

Name Lone Mountain Water Association, c/c

Address 1626 Lincoln Way

City Coeur d'Alene, State ID Zip 83814

## 3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub or Directions to well.

Twp. 52 North ☒ or South ☐

Rge 4 East ☐ or West ☒

Sec. 2 1/4 SE 1/4 SW 1/4

Gov't Lot \_\_\_\_\_ County Kootenai

Lat: \_\_\_\_\_ Long: \_\_\_\_\_

Address of Well Site Rocky Rd

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

City Athol, ID

Lt. \_\_\_\_\_ Blk \_\_\_\_\_ Sub. Name \_\_\_\_\_

## 4. USE:

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

## 5. TYPE OF WORK check all that apply

☐ New Well ☐ Modify ☐ Abandonment ☒ Other Acqua Freed (Replacement etc)

## 6. DRILL METHOD:

☐ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other \_\_\_\_\_

## 7. SEALING PROCEDURES

| Seal Material | From | To | Weight / Volume | Seal Placement Method |
|---------------|------|----|-----------------|-----------------------|
|               |      |    |                 |                       |

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                 |
|----------|------|----|-------|----------|--------------------------|--------------------------|--------------------------|--------------------------|
|          |      |    |       |          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|          |      |    |       |          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|          |      |    |       |          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_

Packer ☐ Y ☐ N Type \_\_\_\_\_

## 9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method \_\_\_\_\_

Screen Type & Method of Installation \_\_\_\_\_

| From | To | Slot Size | Number | Diameter | Material | Casing                   | Liner                    |
|------|----|-----------|--------|----------|----------|--------------------------|--------------------------|
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |

## 10. FILTER PACK

| Filter Material | From | To | Weight / Volume | Placement Method |
|-----------------|------|----|-----------------|------------------|
|                 |      |    |                 |                  |

## 11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

268 ft below ground Artesian pressure \_\_\_\_\_ lb

Depth flow encountered \_\_\_\_\_ ft Describe access port or control devices: \_\_\_\_\_

| Office Use Only |     |       |   |
|-----------------|-----|-------|---|
| Well ID No.     |     |       |   |
| Inspected by    |     |       |   |
| Twp             | Rge | Sec   |   |
| 1/4             | 1/4 | 1/4   |   |
| Lat:            | :   | Long: | : |

## 12. WELL TESTS:

☐ Pump ☐ Bailor ☐ Air ☐ Flowing Artesian

| Yield gal./min. | Drawdown | Pumping Level | Time |
|-----------------|----------|---------------|------|
|                 |          |               |      |

Water Temp. \_\_\_\_\_ Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: \_\_\_\_\_

Depth first Water Encounter \_\_\_\_\_

## 13. LITHOLOGIC LOG: (Describe repairs or abandonment)

| Bore Dia. | From | To | Remarks: Lithology, Water Quality & Temperature                                                 | Water |
|-----------|------|----|-------------------------------------------------------------------------------------------------|-------|
|           |      |    |                                                                                                 | Y N   |
|           |      |    | Performed Aqua Freed treatment: Injected 1700 lbs. of CO2.                                      |       |
|           |      |    | Results: Static level increased from 500' to new level at 268'. Yield increased 2 gpm to 15 gpm |       |

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IAN 13 2006

IDWR/North

Completed Depth \_\_\_\_\_ (Measurable)

Date: Started 11/30/05 Completed 12/20/05

## 14. DRILLER'S CERTIFICATION

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

Company Name Water Recovery Serv. Firm No 584

Principal Driller [Signature] Date 1/10/06

Driller or Operator II \_\_\_\_\_ Date \_\_\_\_\_

Operator I \_\_\_\_\_ Date \_\_\_\_\_

Principal Driller and Rig Operator Required.  
Operator I must have signature of Driller/Operator II

52N 4W 2

IDAHO DEPARTMENT OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

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

WELL TAG NO. D0039876Permit No: 827932

Other IDWR No.

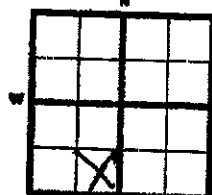
95-9247

## 2. OWNER

Name Lone Mountain Water Association c/c Well Number: 906-merAddress 1626 Lincoln WayCity Coeur d'Alene State ID Zip 83814

## 3. LOCATION OF WELL by legal description

sketch map location must agree with written location

Twp. 52 ☒ North or ☐ SouthRge. 4 ☐ East or ☒ WestSec. 2 1/4 SE 1/4 SW 1/4Gov't Lot \_\_\_\_\_ County KOOTENAI

Lat: \_\_\_\_\_ Long: \_\_\_\_\_

Address of Well Site Rocky Rd  
City Athol

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

Lt. \_\_\_\_\_ Blk. \_\_\_\_\_ 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 \_\_\_\_\_

## DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other \_\_\_\_\_

## 7. SEALING PROCEDURES

| SEAL/FILTER PACK |      |    | AMOUNT<br>Bags or Pounds | METHOD     |
|------------------|------|----|--------------------------|------------|
| Material         | From | To |                          |            |
| BENTONITE        | 0    | 60 | 950 lbs                  | Poured Dry |
|                  |      |    |                          |            |
|                  |      |    |                          |            |

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) RBWas drive shoe seal tested? ☐ Y ☒ N How? \_\_\_\_\_

## 8. CASING/LINER:

| Diameter | From | To  | Gauge | Material   | Casing                              | Liner                    | Welded                              | Threaded                 |
|----------|------|-----|-------|------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 8        | +3   | 267 | .322  | Steel      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12       | +2   | 60  | .250  | -pulled at | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|          |      |     |       |            |                                     |                          |                                     |                          |

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:

500 ft. below ground Artesian pressure \_\_\_\_\_ lb.Depth flow encountered \_\_\_\_\_ ft. Describe access port or control devices: Steel cap welded

## 11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

| Yield gal./min.    | Drawdown | Pumping Level | Time |
|--------------------|----------|---------------|------|
| Estimated air lift |          |               |      |
| 2                  |          |               | 1 Hr |

Water Temp. cold Bottom Hole Temp. cold

Water Quality test or comments: ClearDepth first Water encountered 638

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

| Base<br>Diam | From | To  | Remarks: Lithology, Water Quality, Temperature | Water                                 |                                       |
|--------------|------|-----|------------------------------------------------|---------------------------------------|---------------------------------------|
| 12           | 0    | 3   | Top Soil                                       | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N |
| 12           | 3    | 60  | Sand & Gravels some large cobbles              | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N |
| 10           | 60   | 112 | Sand & Gravels some large cobbles              | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N |
| 10           | 112  | 240 | Gravels & Sand                                 | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N |
| 10           | 240  | 267 | Granite Green & White                          | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N |
| 6            | 267  | 315 | Granite Green & White                          | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N |
| 6            | 315  | 635 | Granite Salt & Pepper                          | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N |
| 6            | 635  | 660 | Granite Little water at 340                    | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N            |

Completed Depth 660 (Measurable)  
Date: Started 1/14/2005 Completed 1/19/2005

## 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. 448Firm Official [Signature] Date 1-14-05and  
Supervisor or Operator [Signature] Date 01/20/05  
Louie Hanner (Sign Once if Firm Official and Operator)

52N 4W 2