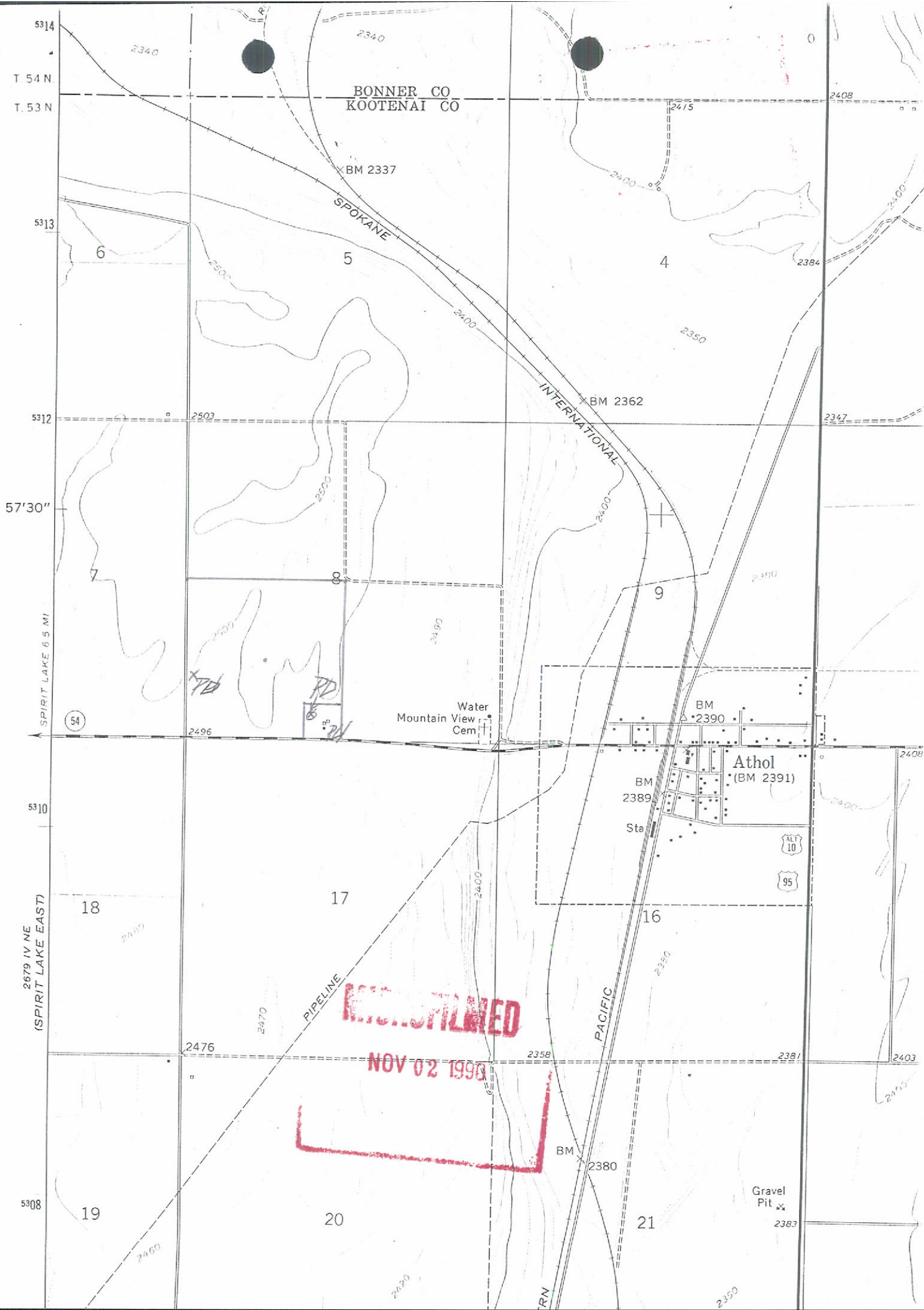




Laura Stebbins
home
MIKROFILMED
NOV 02 1990

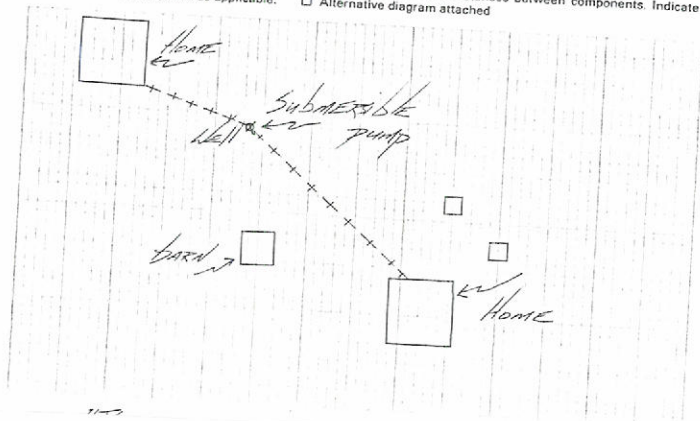


SCHEMATIC

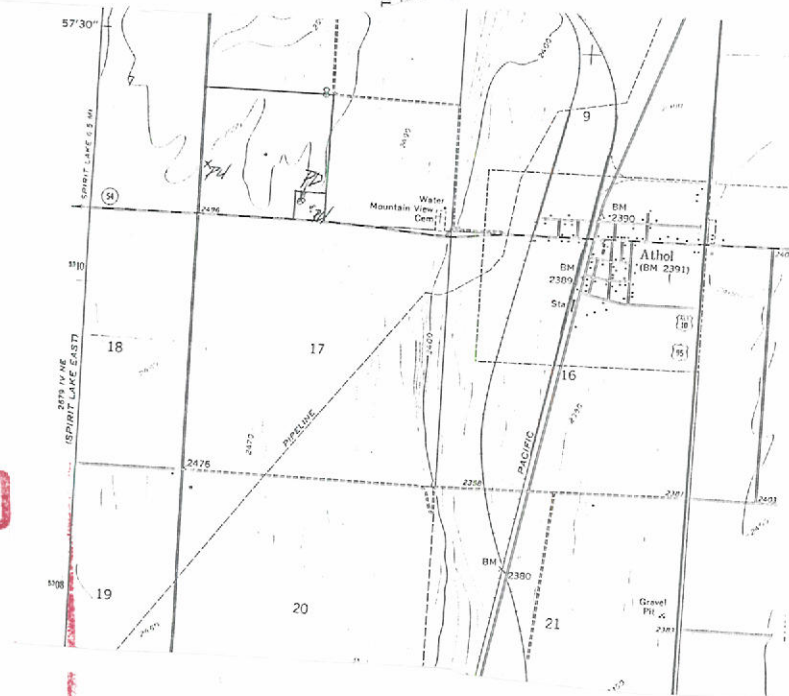
Provide a schematic diagram showing the location of the well in the quarter-quarter with respect to houses, roads, other wells or readily identifiable features.

C. SYSTEM DESCRIPTION

1. Diversion System Diagram: Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



NAME: ALICE ST. LAMAR PERMIT NUMBER: 96-03351
 PD: 1234 R 31, SEC. 8, SE 51 (Amended) GL: 5



NAME: ALICE ST. LAMAR PERMIT NUMBER: 96-03351
 PD: 1234 R 31, SEC. 8, SE 51 (Amended) GL: 5 MAP: #

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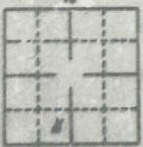
Inspected by

Charlotte Harrison

Date

July 10 '89

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

1. WELL OWNER Name <u>Mrs. Laura Stillman</u> Address <u>4401 Idaho 83801</u> Owner's Permit No. _____		7. WATER LEVEL Static water level <u>454</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____																																																																																																																													
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe the method of abandoning) _____		8. WELL TEST DATA ☐ Pump ☒ Bailor ☐ Air ☐ Other _____																																																																																																																													
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal ☐ Injection ☐ Other _____ (specify type)		<table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td><u>12</u></td><td><u>458</u></td><td><u>11</u></td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>12</u>	<u>458</u>	<u>11</u>																																																																																																																						
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4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☒ Cable ☐ Dug ☐ Other _____		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Hole Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>12</td><td>0</td><td>16</td><td>Gravel sand-silt</td><td></td><td></td></tr><tr><td>12</td><td>16</td><td>89</td><td>Gravel sand w/ sand</td><td></td><td></td></tr><tr><td>10</td><td>29</td><td>72</td><td>Gravel medium w/ sand</td><td></td><td></td></tr><tr><td>8</td><td>72</td><td>125</td><td>Gravel sand w/ fine clay</td><td></td><td></td></tr><tr><td>10</td><td>125</td><td>134</td><td>Gravel med. w/ silt</td><td></td><td></td></tr><tr><td>8</td><td>134</td><td>162</td><td>Gravel 3" med. w/ silt</td><td></td><td></td></tr><tr><td>16</td><td>162</td><td>200</td><td>Gravel cemented tight</td><td></td><td></td></tr><tr><td>20</td><td>200</td><td>246</td><td>Gravel cemented w/ cobbles</td><td></td><td></td></tr><tr><td>24</td><td>246</td><td>291</td><td>Gravel sand-fine clay</td><td></td><td></td></tr><tr><td>24</td><td>291</td><td>297</td><td>Gravel sand w/ silt</td><td></td><td></td></tr><tr><td>24</td><td>297</td><td>353</td><td>Gravel sand w/ cobbles</td><td></td><td></td></tr><tr><td>32</td><td>353</td><td>373</td><td>Sand fine w/ silt</td><td></td><td></td></tr><tr><td>32</td><td>373</td><td>424</td><td>Gravel coarse sand</td><td></td><td></td></tr><tr><td>42</td><td>424</td><td>461</td><td>Gravel sand fine</td><td></td><td></td></tr><tr><td>46</td><td>461</td><td>470</td><td>Gravel pebbles w/ coarse sand</td><td></td><td></td></tr><tr><td>46</td><td>470</td><td>478</td><td>CLAY BLUE</td><td></td><td></td></tr><tr><td>46</td><td>478</td><td>482</td><td>Sand clean & coarse</td><td></td><td></td></tr><tr><td>48</td><td>482</td><td>491</td><td>Sand clean coarse w/ fine</td><td></td><td></td></tr><tr><td>48</td><td>491</td><td>497</td><td>CLAY BLUE</td><td></td><td></td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	12	0	16	Gravel sand-silt			12	16	89	Gravel sand w/ sand			10	29	72	Gravel medium w/ sand			8	72	125	Gravel sand w/ fine clay			10	125	134	Gravel med. w/ silt			8	134	162	Gravel 3" med. w/ silt			16	162	200	Gravel cemented tight			20	200	246	Gravel cemented w/ cobbles			24	246	291	Gravel sand-fine clay			24	291	297	Gravel sand w/ silt			24	297	353	Gravel sand w/ cobbles			32	353	373	Sand fine w/ silt			32	373	424	Gravel coarse sand			42	424	461	Gravel sand fine			46	461	470	Gravel pebbles w/ coarse sand			46	470	478	CLAY BLUE			46	478	482	Sand clean & coarse			48	482	491	Sand clean coarse w/ fine			48	491	497	CLAY BLUE		
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5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness _____ Diameter _____ From _____ To _____ _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☒ Yes ☐ No Manufacturer's name <u>UOP Johnson</u> Type <u>stainless steel</u> Model No. <u>304</u> Diameter <u>2 1/2</u> Slot size <u>0.030</u> Set from <u>478</u> feet to <u>481</u> feet Diameter <u>7 1/2</u> Slot size <u>0.021</u> Set from <u>481</u> feet to <u>491</u> feet Gravel packed? ☐ Yes ☒ No Size of gravel _____ Paced from _____ feet to _____ feet Surface seal depth <u>154</u> Material used in seal: ☒ Cement grout ☐ Puddling clay ☐ Well cuttings Sealing procedure used: ☐ Slurry pit ☒ Temp. surface casing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port <u>100 PUMP Plug in PUMP Seal</u>		10. Work started <u>May 1 - 1984</u> finished <u>June 27 - 84</u>																																																																																																																													
6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>KOOTENAI</u> SE 1/4 SW 1/4 Sec. 8, T. 53, N. 18, R. 3		11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>E.H. Hatzman Drill</u> Firm No. <u>105</u> Address <u>601 S. Pines Rd</u> Date <u>June 27 - 84</u> Signed by (Firm Official) <u>[Signature]</u> and <u>[Signature]</u> (Operator) <u>[Signature]</u>																																																																																																																													

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

RECEIVED
DEC 18 1984
Department of Water Resources
Northern District Office

MICROFILMED

JUN 18 1989

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 96-08391

Priority: March 28, 1984

Maximum Diversion Rate:
Maximum Diversion Volume:¹

0.04 CFS
2.4 AF

This is to certify, that LAURA STELLMAN
P.O. BOX 243

ATHOL, ID 83801 has complied with the terms and conditions
of the permit, issued pursuant to Application for Permit dated March 28, 1984; and
has submitted Proof of Beneficial Use on February 15, 1989. An examination indicates
that the works have a diversion capacity of .040 cfs of water from a **GROUNDWATER**
source, and a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
DOMESTIC	01/01 to 12/31	0.04 CFS	2.4 AF

LOCATION OF POINT(S) OF DIVERSION: SESW , Sec. 8, Township 53N, Range 03W
KOOTENAI County

PLACE OF USE: DOMESTIC

TWN RGE SEC

53N 03W 8 SWSW SESW

CONDITIONS/REMARKS:

1. The maximum diversion volume is defined as the maximum allowable volume of water that may be diverted annually from the source under this right. The use of water confirmed by this right is limited to the amount which can actually be beneficially used. The maximum diversion volume may be adjusted to more accurately describe the beneficial use or to implement accepted standards of diversion and use efficiency.
2. This water right is appurtenant to the described place of use.
3. This right is subject to all prior water rights and may be forfeited by five years of non-use.
4. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.
5. Domestic use is for 2 homes.

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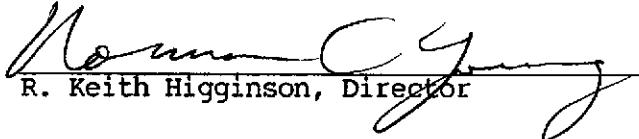
State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 96-08391

This license is issued pursuant to the provisions of Section 42-219, Idaho Code.
Witness the seal and signature of the Director, affixed at Boise, this 10TH
day of OCTOBER, 1990.

Acting for


R. Keith Higginson, Director

MICROFILMED

NOV 02 1990

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

APPROVED

1. Name of applicant Laura Stellman Phone 688-2361

Post office address Box 243 ATHOL, Idaho 83801*

2. Source of water supply GROUNDWATER which is a tributary of _____

3. Location of point of diversion is SW $\frac{1}{4}$ of SW $\frac{1}{4}$ of Section 8 Township 53N

Range 3W B.M. (KOOTENAI) County, additional points of diversion if any: _____

(PD Located in center of SW $\frac{1}{4}$ sec 8)

4. Water will be used for the following purposes:

*kw 4/26/1984

Amount 0.08 for Domestic purposes from 1-1 to 12-31 (both dates inclusive)
(cfs or acre-feet per annum)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)

Amount _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)

5. Total quantity to be appropriated:

a. 0.08 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. Pump & pipeline to place of use

b. Height of storage dam _____ feet, active reservoir capacity _____ acre-feet; total reservoir capacity _____ acre-feet, materials used in storage dam: _____

Period of year when water will be diverted to storage _____ to _____ inclusive.
(Month/Day) (Month/Day)

c. Proposed well diameter is 8 inches; proposed depth of well is 500⁺ feet.

7. Time required for the completion of the works and application of the water to the proposed beneficial use is 5 years (minimum 1 year — maximum 5 years).

8. Description of proposed uses:

a. If water is **not** for irrigation:

(1) Give the place of use of water: SW $\frac{1}{2}$ of SW $\frac{1}{4}$ of Section 8 Township 53N
Range 3W B.M.

(2) Amount of power to be generated: _____ horsepower under _____ feet of head.

(3) List number of each kind of livestock to be watered _____

(4) Name of municipality to be served _____, or number of families to be supplied with domestic water 2.

(5) If water is to be used for other purposes describe: _____

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SECRET

[illegible]

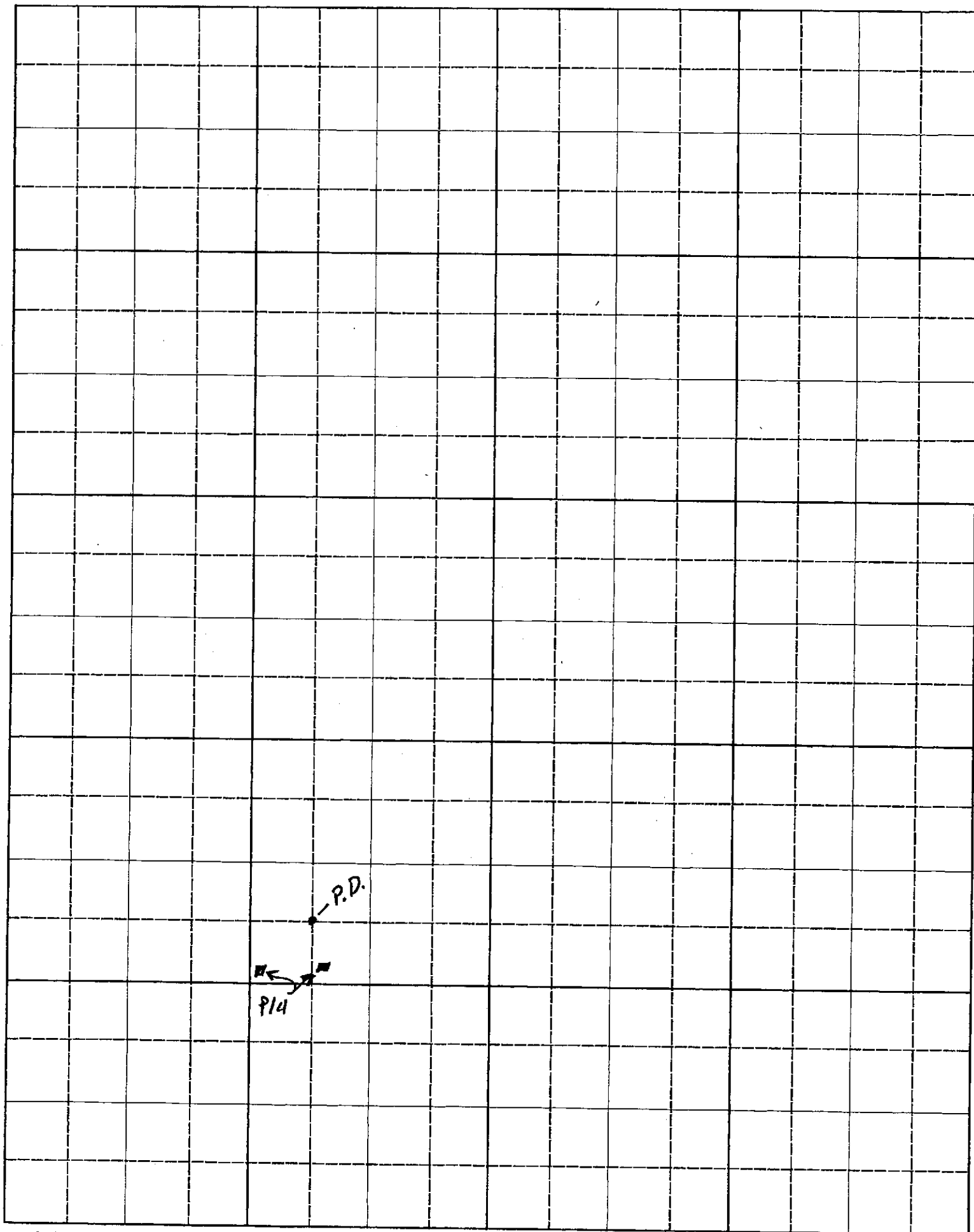
Total number of acres to be irrigated

APD

[Signature]

[illegible]

11. Map of proposed project: show clearly the proposed point of diversion, place of use, section number, township and range number.



Scale: 2 inches equal 1 mile.

BE IT KNOWN that the undersigned hereby makes application for permit to appropriate the public waters of the State of Idaho as herein set forth.

* Laura Stollman
(Applicant)

Proposed Priority 3/28/84

Received by TK Date 3/28/84 Time 3:15 PM
Preliminary check by RNA Fee \$ 30.00
Receipted by pm Date 3/28/84 (31486)
Publication prepared by pm Date 3/29/84
Published in Coeur d'Alene Press
Publication dates 4/5 & 12/84
Publication approved pm Date 4/16/84
Protests filed by: none

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by RNA kw

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

This is to certify that I have examined Application for Permit to appropriate the public waters of the State of Idaho No. 96-8391, and said application is hereby APPROVED.

1. Approval of said application is subject to the following limitations and conditions:

- a. SUBJECT TO ALL PRIOR WATER RIGHTS.
- b. Proof of construction of works and application of water to beneficial use shall be submitted on or before April 1, 19 89.
- c. The rate of diversion, if water is to be used for irrigation under this permit, when combined with all other water rights for the same land shall not exceed 0.02 cubic feet per second for each acre of land.
- d. Other: Permit holder shall commence the excavation or construction of diverting works within one year of the date this permit is issued and shall proceed diligently until the project is complete.

Witness my hand this 30th day of April, 1984.

L. Glen Saxton
Chief, Operations Bureau

AFFIDAVIT OF PUBLICATION

STATE OF IDAHO, }
County of Kootenai, } ss.

Carol Hodge being first duly sworn
upon oath deposes and says:

1. I am now and at all times hereinafter mentioned was a citizen of the United States, resident of the State of Idaho, over the age of twenty-one years and not a party of the above entitled action.

2. I am now and at all times hereinafter mentioned was the printer (principal clerk) of the "Coeur d'Alene Press," a newspaper printed and published daily except Sunday in Coeur d'Alene, Kootenai County, Idaho, and having a general circulation in said county.

3. The Notice

of which the annexed is a printed copy, was published in the regular Thursday issue of said newspaper for 2 consecutive weeks commencing on the 5 day of April, 1984, and ending on the 12 day of April, 1984, and such publication was made as often during said period as said daily newspaper was regularly issued.

4. That said newspaper has been continuously and uninterruptedly published in said Kootenai County, during a period of more than seventy-eight consecutive weeks immediately prior to the first publication of said notice.

Carol Hodge
Subscribed and sworn to before me this 12 day of April, 1984

Robert J. Manley
Notary Public for the State of Idaho,
residing at Coeur d'Alene, Idaho.

NOTICE OF APPLICATION FOR WATER RIGHT

The following application(s) have been filed to appropriate the public waters of the State of Idaho:

96-8391

STELLMAN, LAURA

P. O. BOX 243, ATHOL, ID 83801

Source: GROUNDWATER

Date Filed: 03/28/1984

Diversion Pt: SWSW Sec 08 T 53N

R 03W

Use: DOMESTIC (0.08 CFS)

In: SESW SWSW Sec 08 T 53N R

03W

The permit(s) will be subject to all prior water rights. Protests must be filed with the Director, Dept. of Water Resources, 4055 Gov't Way, Coeur d'Alene, Id, 83814 on or before APRIL 23, 1984

KEN DUNN, Dir.

LEGAL 718

APRIL 5, 12, 1984

RECEIVED

APR 16 1984

Department of Water Resources
Northern District Office

October 11, 1990

LAURA STELLMAN
P.O. BOX 243
ATHOL, ID 83801

RE: PERMIT NO. 96-08391

Dear Permit Holder(s):

Enclosed herewith is a copy of the Water Right License issued on the above referenced permit.

Sincerely,

JIM JOHNSON
Water Rights Supervisor

JJ:blm

Enclosure

MICROFILMED

NOV 92 1990

September 18, 1990

LAURA STELLMAN
P.O. BOX 243
ATHOL, ID 83801

RE: PERMIT NO. 96-08391

Dear Permit Holder(s):

Enclosed is a draft copy of the license proposed to be issued on the above referenced water right.

This right is currently being reviewed by this office for licensing. The enclosed preliminary copy is subject to change upon further administrative review.

We ask that you review the proposed license and if you do not concur with the information, please let us know within 10 days.

Sincerely,

JIM JOHNSON
Water Rights Supervisor

JJ:sc

Enclosure

RECEIVED

NOV 12 1990

SENIOR AGENT REVIEW

RECEIVED
JUN 27 1990

Check List
for
Beneficial Use Field Report

Department of Water Resources

Permit 96-08391

✓ A. GENERAL INFORMATION

- ✓ 1. Name and address are most current available. (Check BU statement)
✓ 2. Exam Date
✓ 3. Source (Check Permit)

✓ B. OVERLAP REVIEW

- ✓ 1. & 2. (Rule 5,1,4)

✓ C. SYSTEM DESCRIPTION

- ✓ 1. Diversion System Diagram (Rule 5,1,3 / 5,1,4)
✓ 2. USGS (Rule 5,1,7 / 5,1,9) Aerial (Rule 5,1,17)
Photo of pd and/or pu or explanation
TDK ✓ 3. Word Picture (Rule 5,1,3 / 5,1,4)
TDK ✓ 4. Diversion (Rule 5,1,3)
TDK ✓ 5. Compare with USGS Map, Land Survey Maps, Aerial Photos and Permit.
6. Irrigation (Rule 5,1,8) method of determination

✓ D. FLOW MEASUREMENTS Check math (Rule 5,1,13 / 5,1,14)

✓ E. FLOW CALCULATIONS Check math (Rule 5,1,13 / 5,1,14)

✓ F. OPTIONAL

✓ G. VOLUME CALCULATIONS

- Three significant figures and no more than 1/10's (Rule 6,1,2)
Fish (Rule 5,1,11) number stock, homes, etc... (Rule 5,1,12)

✓ H. REMARKS AND OVERLAP ANALYSES

- ✓ All actual uses listed (Rule 5,1,2):
✓ All unused, permitted uses listed (Rule 5,1,2):
✓ Overlaps (Rule 5,1,4):
✓ Return flows (Rule 5,1,5):
✓ Conditions (Rule 5,1,6).

✓ I. RECOMMENDATIONS

- ✓ 1. Municipal (Rule 5,1,10): Compare with items E & G, permit, fee, capacity
(Rule 5,1,15): Measured flows for each use listed separately (Rule 5,1,14).
Period of year (Rule 5,1,13)
✓ 2. Compare permit to exam for amendments (Rule 5,1,16)

✓ J. AUTHENTICATION

Name, Signature, Certification Date, Exam Date.

✓ WELL INSPECTION REPORT

Check with permit and well log for discrepancies

Signature

Tom H. King

Date

3/26/90



LAURA STELL
HOME

MICROFILMED

NOV 02 1990

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 27 1990

Department of Water Resources

A. GENERAL INFORMATION

1. Owner: Laura Hellman
Current Address: Box 243 Athol Id. 83801
2. Accompanied by: Laura Hellman
Address: same as above
Relationship to Permit Holder: self
3. Source: Groundwater tributary to _____

Permit No. 96-08391
Phone No. 683-2361
EXAM. DATE: July 10 1989
Phone No. same

B. OVERLAP REVIEW

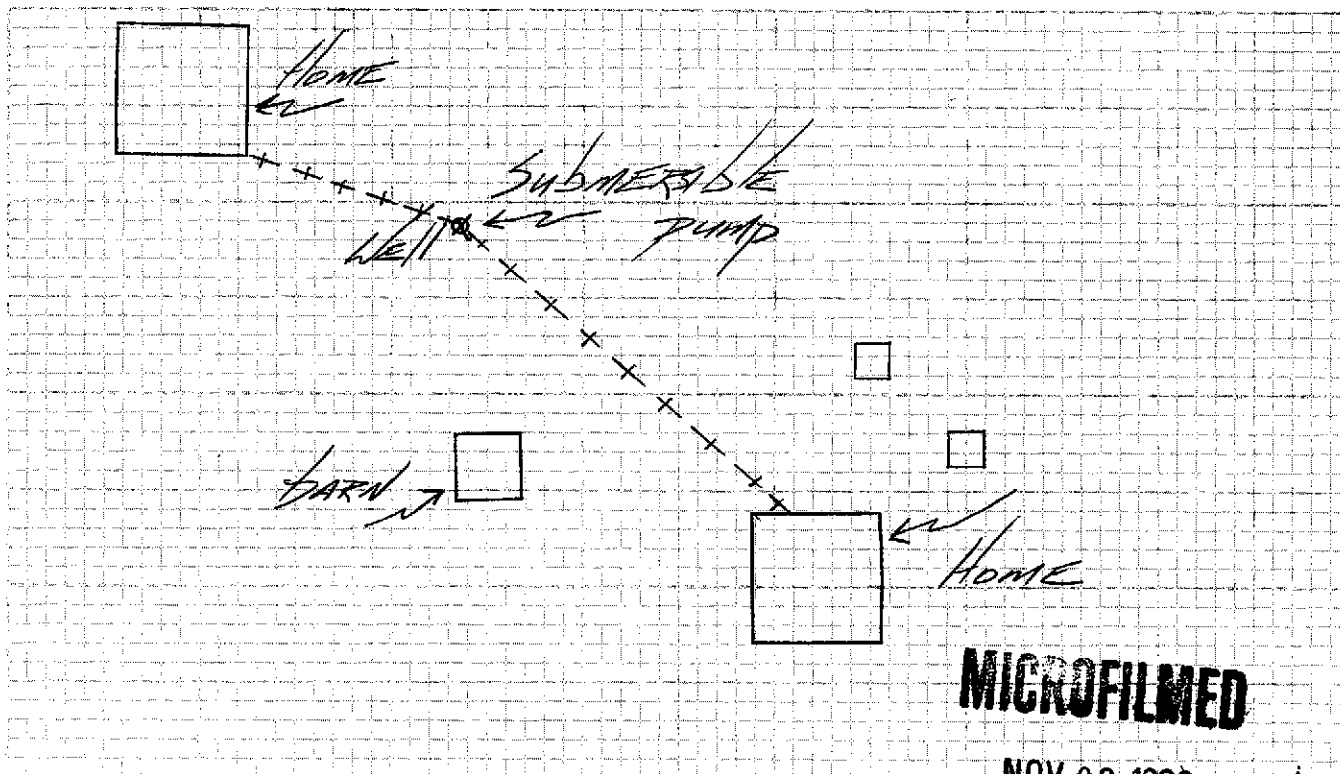
1. Other water rights with same place of use: NONE

☐ Copies Attached
2. Other water rights with same point of diversion: NONE

☐ Copies Attached ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

1. **Diversion System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



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Scale: 1" = NTS

2. ☒ Copy of U.S.G.S. Quadrangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required). ☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).
☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater).

System Description (continued)

3. **Narrative:** Description (As operating at time of measurement. Indicate pressure, number of sprinklers, etc.)

AN 8" X 497' WELL w/ SUBMERSIBLE PUMP & PIPELINE

☐ See Remarks on page 4 for continuation

4.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
<u>SUBMERSIBLE</u>					

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

5. **Point(s) of Diversion:**

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
					<u>8</u>	<u>53N</u>	<u>3W</u>	<u>Footwall</u>	<u>MAP</u>

6. **Place(s) of Use:**

Indicate Method of Determination

MAP

Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
<u>53N</u>	<u>3W</u>	<u>8</u>											<u>DD</u>						<u>SEE CWA</u>

MICROFILMED

NOV 02 1990

Do not use this space

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date

2. Measurements:

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

0.08 cfs

0.04 B/U INFO TDR

2. Alternate Method for Checking Purposes:

F. PUMP EFFICIENCY DATA (Optional)

Discharge Pressure: _____ psi x 2.31 = _____ ft (1); Dynamic pumping level: _____ ft (2)

Total Head: (1) + (2) = _____ (3) ; Flow rate: _____ cfs (4)

Water HP: (3) x (4) ÷ 8.8 = _____ (5)

Meter Input KW: 3.6 x _____ KH x _____ CTR or _____ MULT x _____ PTR x _____ N/ _____ T = _____ (6)

Meter Input HP: (6) x 1.34 = _____ (7)

Panel Input KW: _____ Ave PF x _____ Ave Volts x _____ Ave Amps x .001732 = _____ (6)

Panel Input HP: (6) x 1.34 = _____ (7) Efficiency: (5)/(7) x 100 = _____ %

G. 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:

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NOV 02 1990

1.2 home w/ANN 2 homes @ 2.4 AF

H. REMARKS AND OVERLAP REVIEW ANALYSIS

I. RECOMMENDATIONS

1. Recommended Amounts

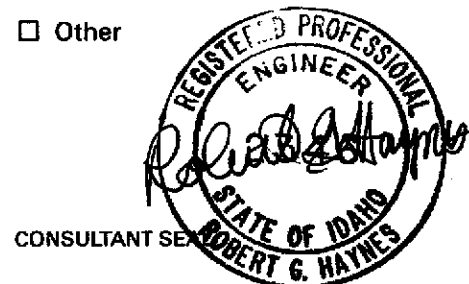
Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
<u>Domestic</u>	<u>1-1</u>	<u>12-31</u>	<u>0.08</u> <u>0.04</u> TDK	<u>2.40</u>
Totals:			<u>0.08</u> <u>0.04</u> TDK	<u>2.40</u>

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 |

J. AUTHENTICATION

Field Examiner's Name Charlotte Ammon
Signature Charlotte Ammon
Certification Date 2/17/89
Field Report Preparation Date July 10 1989



- K. Licensing recommendation shall be prepared by an Idaho Department of Water Resources employee on a computer printout attached hereto.

MICROFILMED

NOV 02 1990

5314
T. 54 N.
T. 53 N.
5313
57'30"
5312
SPIRIT LAKE 6.5 MI
5310
2679 IV NE
(SPIRIT LAKE EAST)
5308

BONNER CO
KOOTENAI CO

BM 2337

SPOKANE

BM 2362

Water
Mountain View
Cem

BM
2390

Athol
(BM 2391)

BM
2389

Sta

ALT
10
95

REPRODUCTION

NOV 02 1990

BM
2380

Gravel
Pit

2383

6

5

4

8

9

18

17

16

19

20

21

PIPELINE

PACIFIC

2450

2470

2350

2340

2340

0

2408

2415

2400

2400

2384

2350

2500

2503

2900

2400

2350

2496

2408

2476

2358

2381

2403

2400

2400

2400

2400

2400

2400

2400

State of Idaho

Department of Water Resources

WELL INSPECTION FORM

This form should be completed by the examiner when conducting a field examination to determine the extent of beneficial use of water from a well or whenever a well is inspected for other reasons. The form should be forwarded to Groundwater Protection Section in the State Office upon completion.

1. Legal Description of well location. Twp. 53N, Rge. 3W,
Sec. 8, Qtr./Qtr. SE SW or Lot _____
2. Owner LAURA STELLMAN
Address Box 243, City Arco, State Id
3. Approx. date of well construction JUNE 1984
Well Driller EA Holman Drilling Co.
4. Casing: Diameter 8 in Condition _____
5. Casing length above land surface 2 ft.
6. Well depth (ft) 497 Flowing _____ Temp. _____
Access port X
7. Condition of piping and valving _____
8. Evidence of well seal _____
9. Shut in pressure or static water level 454 ft
10. Evidence of leakage around the casing _____
11. Does well need repair _____
12. Comments _____

(OVER)

MICROFILMED

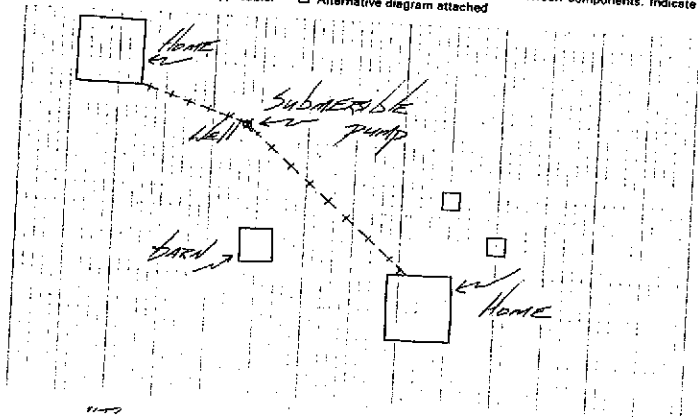
NOV 02 1990

SCHEMATIC

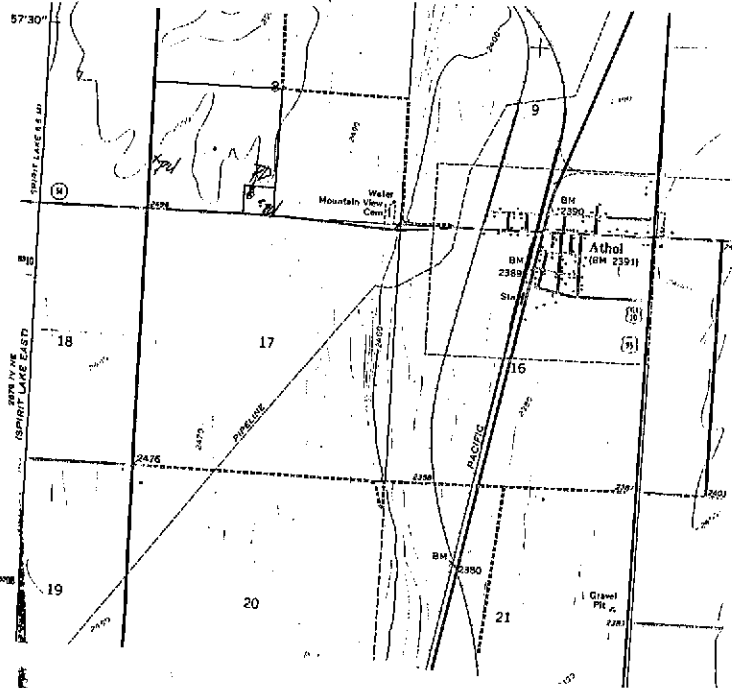
Provide a schematic diagram showing the location of the well in the quarter-quarter with respect to houses, roads, other wells or readily identifiable features.

C. SYSTEM DESCRIPTION

1. Diversion System Diagram: Indicate all major components and distances between components. Indicate well size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



NAME: LAUREN S. HARRIS PERMIT NUMBER: 90-008351
 PO: T234 R31 S10 SEC. 8, T. 35 N. R. 31 E. S. 10 (1/4) GL: NHP #



NAME: LAUREN S. HARRIS PERMIT NUMBER: 90-008351
 PO: T234 R31 S10 SEC. 8, T. 35 N. R. 31 E. S. 10 (1/4) GL: NHP #

MICROFILMED

NOV 02 1990

Inspected by Charles E. Harrison

Date July 10 '89



State of Idaho

DEPARTMENT OF WATER RESOURCES

NORTHERN REGION, Suite 210 • 1910 Northwest Blvd. • Coeur d'Alene, Idaho 83814 • (208) 765-4639

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

May 16, 1989

RECEIVED
MAY 22 1989

Ms. Laura Stellman
Box 243
Athol, Id. 83801

Re: 96-8391

Department of Water Resources

Dear Ms. Stellman:

We acknowledge receipt of your statement of completion of water development use for the above-referenced permit.

Before a license can be issued, a field examination must be made by a representative of this Department. We do not know at this time when he will be able to conduct the examination; however, the examiner will try to contact you prior to the time the examination is made so that you may demonstrate the system. If you will not be available to show the system, please provide this office with the name and address of someone who will be able to do so. Your permit will remain valid until the examination is made.

If you have any questions concerning the field examination, please contact this office. Please be sure to use the above-referenced permit number in all future correspondence concerning this examination.

Sincerely,

/s/
TOM D. KING
Senior Water Resource Agent

TDK/pms

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JUL 18 1989

Celebrate
IDAHO
1890 • CENTENNIAL • 1990

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 96-8391

Date: 4/25/89

General Considerations:

Y Name same as permit
Y Signature the same as permit holder
N Address change _____ If yes, prepare a data entry
Y Proof received timely _____
_____ Reinstated

Source of Water:

Y Surface water
Y Groundwater
_____ 1. well log in file
_____ 2. drilling permit
_____ A. amount of drilling fee paid for proposed uses

Extent of Use and Rate of Diversion:

Y Rate of diversion appropriate for uses
Y Is rate or volume and fee appropriate?
Y Has permit holder indicated when water was first put to a beneficial use?

Measuring Device:

N/A Is a measuring device or access port required?
N/A Has one been installed?
N/A Waiver or modification of measuring device requested

Remarks:

Proof acceptable

N/A

Priority Calculation:

Date proof received _____

Date proof due _____

No. of days late _____

Priority date _____

NEW PRIORITY DATE _____

SEND FILES TO DATA ENTRY AND THEN TO MICROFILM

MICROFILMED

JUL 18 1989

RECEIVED

FEB 21 1989

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

For Office Use Only
Fee Received \$ N/A
Receipt # _____
Received by _____
Reviewed by _____
Sent to Region By JS

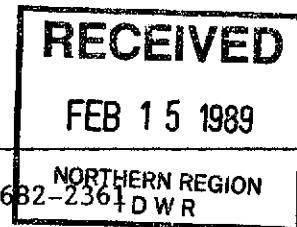
Department of Water Resources PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources will consider this form as a statement that the permit holder(s) has completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee or a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

Permit # 96-08391 ✓

Name of Permit Holder : LAURA STELLMAN ✓

Post Office Address: BOX 243 ATHOL, ID. 83801 ✓



Telephone No: 682-2361

Source of water: GROUND WATER ✓

Extent of use:

Domestic (number of homes) 2 ✓ Stock _____ (number and type of stock)
Irrigation (number of acres) _____ Other/Remarks _____

Total Rate and/or volume for which proof is submitted 0.04 cfs/ _____ acre-feet
Show the date water was first diverted and beneficially used under this permit: 7/1/84 ✓

Measuring Device: Required ? _____ Yes X No _____ Fee Enclosed \$ -0-
Installed ? _____ Yes X No _____ (See License Examination Fee Sched)

Flow Measurement Port: Required ? _____ Yes X No _____
16 1/2 gallons per minute Installed ? _____ Yes X No _____

Person to contact to accompany the Department representative during the field examination:

(Name)

(Telephone Number)

(Address)

The above information is my true statement of the extent to which the above numbered permit has been developed and I relinquish any undeveloped portion of the permit to the state of Idaho.

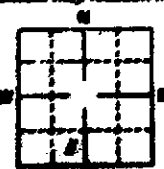
2-8-89 JUL 18 1989
Date

X Laura Stellman
Signature of permit holder (and title, if appropriate)

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

USE FOR RECORD AND
REFERENCE ONLY

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

1. WELL OWNER Name <u>David Stokman</u> Address <u>1011 S. 83rd</u> Owner's Permit No. _____	7. WATER LEVEL Static water level <u>484</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F ☐ °C day _____																																																																										
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (or the method of abandoning)	8. WELL TEST DATA ☐ Pump ☒ Bailer ☐ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Water Pumping</th> </tr> <tr> <td><u>12</u></td> <td><u>484</u></td> <td><u>11</u></td> </tr> </table>	Discharge G.P.M.	Pumping Level	Water Pumping	<u>12</u>	<u>484</u>	<u>11</u>																																																																				
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Salvage ☐ Industrial ☐ Stock ☐ Waste Disposal ☐ Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Depth</th> <th>Material</th> <th>Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yield</th> </tr> </thead> <tbody> <tr><td>12</td><td>16</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>16</td><td>29</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>29</td><td>72</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>72</td><td>125</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>125</td><td>184</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>184</td><td>187</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>187</td><td>188</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>188</td><td>200</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>200</td><td>246</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>246</td><td>291</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>291</td><td>337</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>337</td><td>373</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>373</td><td>424</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>424</td><td>461</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>461</td><td>478</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>478</td><td>491</td><td>Gravel sand - silt</td><td>✓</td></tr> <tr><td>491</td><td>497</td><td>Gravel sand - silt</td><td>✓</td></tr> </tbody> </table>	Depth	Material	Water	From	To	Yield	12	16	Gravel sand - silt	✓	16	29	Gravel sand - silt	✓	29	72	Gravel sand - silt	✓	72	125	Gravel sand - silt	✓	125	184	Gravel sand - silt	✓	184	187	Gravel sand - silt	✓	187	188	Gravel sand - silt	✓	188	200	Gravel sand - silt	✓	200	246	Gravel sand - silt	✓	246	291	Gravel sand - silt	✓	291	337	Gravel sand - silt	✓	337	373	Gravel sand - silt	✓	373	424	Gravel sand - silt	✓	424	461	Gravel sand - silt	✓	461	478	Gravel sand - silt	✓	478	491	Gravel sand - silt	✓	491	497	Gravel sand - silt	✓
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4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☒ Cable ☐ Dig ☐ Other _____	5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>2.77</u> inches</td> <td><u>8</u> inches</td> <td><u>1.5</u> feet</td> <td><u>478.7</u> feet</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ perforations _____ feet _____ feet perforations _____ feet _____ feet perforations _____ feet _____ feet Well screen installed? ☒ Yes ☐ No Manufacturer's name <u>UOP Johnson</u> Type <u>Double Steel</u> Model No. <u>304</u> Diameter <u>7.8</u> inches Slot size <u>0.02</u> inch Set from <u>478</u> feet to <u>481</u> feet Diameter <u>7.8</u> inches Slot size <u>0.02</u> inch Set from <u>481</u> feet to <u>491</u> feet Gravel pack? ☐ Yes ☒ No Size of gravel _____ Paced from _____ feet to _____ feet Surface seal depth <u>1.57</u> Material used in seal: ☒ Cement grout ☐ Well cuttings ☐ Puddling clay ☐ Temp. surface casing Sealing procedure used: ☐ Slurry pit ☒ Temp. surface casing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent ☐ Cemented between strata Describe access port <u>1 inch Pump Plug in Pump Seal</u>	Thickness	Diameter	From	To	<u>2.77</u> inches	<u>8</u> inches	<u>1.5</u> feet	<u>478.7</u> feet																																																																		
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6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ Corner <u>NORTENAI</u> <u>1011 S. 83rd</u> <u>W. 1st</u> <u>N.E. R. 1</u> <u>6th</u>	10. Work started <u>7/24/1987</u> finished <u>June 17/88</u> 11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>E.H. Metzger Drill Co.</u> Address <u>601 S. Pine St.</u> <u>Shoshone, ID 83455</u> Signed by (Firm Official) <u>[Signature]</u> Date <u>June 17/88</u>																																																																										

RECEIVED
DEC 19 1987
Department of Water Resources
Boise, Idaho 83725

MICROFILMED

18 1989

LAURA STELLMAN
P.O. BOX 243
ATHOL, ID 83801

January 31, 1989

138948

PROOF DUE NOTICE

RE: PERMIT NO. 96-08391

Dear Permit Holder:

One of the conditions of approval of the above referenced water permit was that proof of the extent of your beneficial use must be submitted to this office on or before April 1, 1989. (See last page of your approved permit or your last approved extension request.) Enclosed is a form which when accompanied by the license examination fee or a complete field examination report prepared by a certified water right examiner may be used to submit the required proof.

If you have not fully completed your project, and you or a previous owner of this permit have not received a prior extension of time, you may request an extension of time if the delay is for reasonable cause as provided in Section 42-204, Idaho Code. If you have been prevented from proceeding by a governmental agency or by litigation which might bring title to the water in question, more than one extension of time can be granted. An extension of time request form is enclosed for your convenience.

Either an acceptable proof of beneficial use submittal or an acceptable request for an extension of time must be received by this department on or before the above described proof due date. If neither is received, the department will send you a lapse notice. Within sixty (60) days of the mailing of the lapse notice, the permit will no longer be of any force nor effect.

SINCERELY,

Rita Fleck
Secretary/Records Manager

Enclosures

MICROFILMED

JUL 18 1989

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
COMMENCEMENT OF WORKS

Permit No. 96-8391
Name(s) of Permit Holder(s): Laura Stellan
Post Office Address: POB 243, Athol, Id. 83801
Tel. No. _____

- ☒ I hereby certify that construction of diversion works for the above referenced permit began on 5/2/84 (date). I understand that I must continue to develop the water system with due diligence to maintain a valid permit.
- ☐ I hereby certify that construction of diverting works on the above referenced project has not yet begun due to the following reason beyond my control*:

*Note: A financing difficulty is not an acceptable reason.

5/24/84
Date

Laura Stellan
Signature of Permit Holder

PLACE
STAMP
HERE

RECEIVED

MAY 31 1984



MICROFILMED
JUL 18 1989

IDAHO DEPARTMENT OF WATER RESOURCES
STATEHOUSE
BOISE, IDAHO 83720

May 17, 1984

RE: Permit No. 96-8391

Laura Stellman
Box 243
Athol, ID 83801

Dear Permit Holder:

Enclosed is a copy of your approved Application for Permit. We direct your attention to the conditions of approval on the fourth page.

The 1982 Idaho Legislature added a requirement that as a permit holder you must commence the excavation or construction of diverting works within one year of the date the permit was issued, and you must proceed diligently until the project is completed. The enclosed blue card must be completed and returned to this office as soon as you commence construction, no later than one year from the date the permit was approved.

We have enclosed instructions entitled "Making Proof of Beneficial Use". Please read the instructions carefully since you must take further action to develop this permit into a license.

Sincerely,

DAVID R. TUTHILL, JR., P.E.
Supervisor, Water Allocation Section

DRT:sc
Enclosures

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: RSH

APPLICATION NUMBER: 96-8391

CHECK:

- ☒ Source.
☒ Point of diversion.
☒ County.
☒ Quantity of water and period of use.
☒ Description of diverting works.
☒ Time required for beneficial use of water.
☒ Place of use or acres irrigated.
☒ Map.
☒ Signature.
☒ Fee.
☐ Yes ☒ No Field check required.
☐ Yes ☒ No Critical groundwater area.
☐ Yes ☒ No Request dam safety information. Sent by: _____ Date: _____
☒ Yes ☐ No* In form to receipt.

Field check by: _____

Date: _____

Comments: _____

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: _____

SEND COPIES TO:

- ☐ Idaho State Health Department.
☐ Idaho Fish and Game Department.
☐ Idaho Department of Lands.
☐ U.S. Bureau of Land Management.
☐ U.S. Forest Service.
☐ Other _____

Copies sent by: _____

Date: _____

PROCESSING:

- ☐ Yes ☐ No
☐ Yes ☐ No

Platted by: _____ Map No. _____

Other rights on same place of use. _____

- ☒ Yes ☐ No*

In form for advertising.

Final date for protests: 4/23/84

- ☐ Yes ☒ No

Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 4/16/84
☒ Application published correctly. If not, record action taken: _____
☒ Fee amount, receipt date & number, recorded on application.
☒ Publication dates and paper, recorded on application.
☒ Protests, dates, withdrawal, etc., recorded on application.
☒ Recommendation & initial, recorded on application.

- ☐ Yes ☒ No

Measuring device required.

- ☐ Yes ☒ No

Access port required.

- ☐ Yes ☒ No

Will water be delivered by watermaster? If yes, what district? _____

- ☒ 3/28/84

Date of priority recommended.

Special conditions of approval or cover letter. _____

By: RSH

Date: 4/24/84

STATE OFFICE REVIEW:

417

26

- ☐ See attached sheet for more information.

By: KW

Date: 4-26-84

MICROFILMED

MICROFILMED
JUL 1 1984
APR 26 1984

Department of Water Resources

96-8391-

STELLMAN, LAURA

P.O. BOX 243, ATHOL, ID 83801

Source: GROUNDWATER

Date Filed: 03/28/1984

Diversion Pt: SWSW Sec 08 T 53N R 03W

Use: DOMESTIC (0.08 CFS)

In: SESW SWSW Sec 08 T 53N R 03W

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