

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 28 1991

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 95-08439

1. Owner: State Line Water Assn.

Phone No. 773-7765

Current Address: W. 6805 Prairie Prairie Ave. Post Falls Id 83854

2. Accompanied by: Mrs Charlotte Ogilvie

EXAM. DATE: 12-17-90

Address: SAME

Phone No. SAME

Relationship to Permit Holder: SEC/TREAS

3. Source: GROUND WATER tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: 95-08166 ☐ Copies Attached

2. Other water rights with same point of diversion: 95-08166 ☐ Copies Attached ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

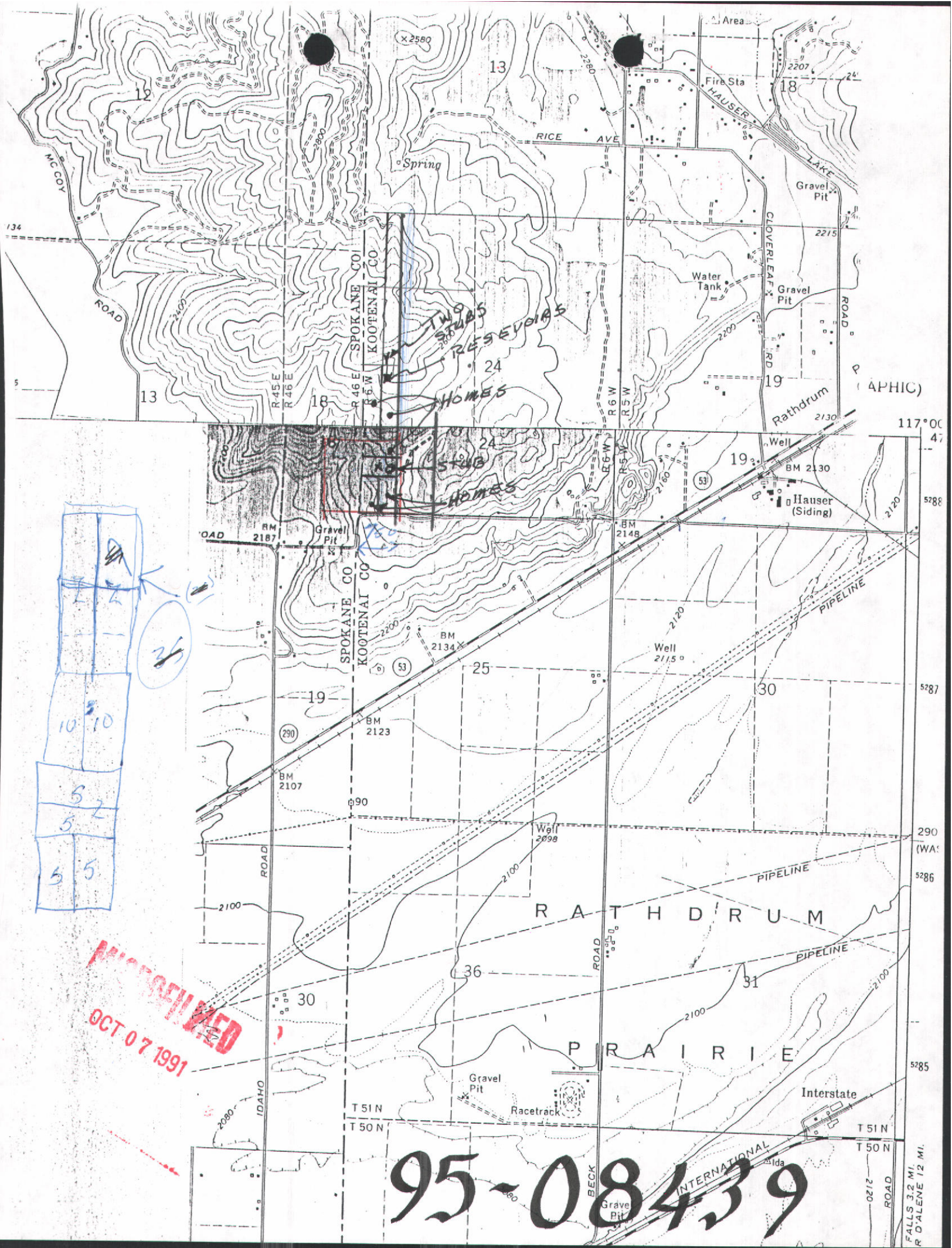
1. **Diversion System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



Scale: 1" = NTS

OCT 07 1991

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).



Handwritten blue grid with numbers:

10	10
5	2
5	5

PHOTOCOPYED
OCT 07 1991

95-08439

FALLS 3.2 MI.
R D'ALENE 12 MI.

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08439

Priority: April 27, 1984

Maximum Diversion Rate:
Maximum Diversion Volume:¹

0.04 CFS
8.8 AF

This is to certify, that STATE LINE WATER ASSN. INC.

W. 6805 PRAIRIE AVE.

POST FALLS ID 83854

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated April 27, 1984; and has submitted Proof of Beneficial Use on April 14, 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>
IRRIGATION	04/01 to 11/01	0.04 CFS	7.0 AF
DOMESTIC	01/01 to 12/31	0.04 CFS	1.8 AF
	Totals	0.04 CFS	8.8 AF

LOCATION OF POINT(S) OF DIVERSION:

SWSW , Sec. 24, Township 51N, Range 06W
KOOTENAI County

PLACE OF USE: IRRIGATION

<u>TWN</u>	<u>RGE</u>	<u>SEC</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
51N	06W	24	SWNW 0.5	NWSW 0.5	SWSW 1	2
Total number of acres irrigated:						2

PLACE OF USE: DOMESTIC, same as IRRIGATION use

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. This right when combined with all other rights shall provide no more than .02 cfs per acre nor more than 3.5 afa per acre for the lands above.

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State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08439

CONDITIONS/REMARKS:

6. Domestic use is for 3 homes.

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 3RD
day of SEPTEMBER, 1991.

Acting for


R. Keith Higginson, Director

OCT 07 1991

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

APPROVED

To appropriate the public waters of the State of Idaho

1. Name of applicant State Line Water Association Inc. Phone 667 6968
Post office address 403 S 11th St., Apt #7, Coeur d'Alene, Idaho 83814
2. Source of water supply Ground Water which is a tributary of —
3. Location of point of diversion is Gov't Lot #4 (SW SW) - JK of Section 24 Township 51 North
Range 6W B.M. Kootenai County, additional points of diversion if any: —

4. Water will be used for the following purposes:

Amount 0.14 for Domestic purposes from Jan 1 to Dec 31 (both dates inclusive)
(cfs or acre-feet per annum) Allow 4/1 to 11/1*
Amount 0.20 for Irrigation purposes from Jan 1 to Dec 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)

5. Total quantity to be appropriated:

a. 0.20 cubic feet per second and/or b. — acre-feet per annum.

6. Proposed diverting works:

- a. Description of ditches, flumes, pumps, headgates, etc. 300 feet deep, 8 inch well with a 5 horse power (submerged) pump. Also a 3400 gallon storage system.
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 8.0 inches; proposed depth of well is 300 feet.

7. Time required for the completion of the works and application of the water to the proposed beneficial use is Allow 5 years*
--0-- 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: Gov't Lots 1, 2, 3 & 4 (W²W²) - JK
Gov't Lot #4 of Section 24 Township 51 North
Range 6W 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 Domestic Animals
(4) Name of municipality to be served —, or number of families to be supplied with domestic water 9 Families (maximum)
(5) If water is to be used for other purposes describe: —

WICPCH MFD

UNCLASSIFIED

for total con 5/21/84-JK

Total number of acres to be irrigated	75.2
---------------------------------------	------

~~None~~

- State Line Water Association, Inc.

- _____
- _____

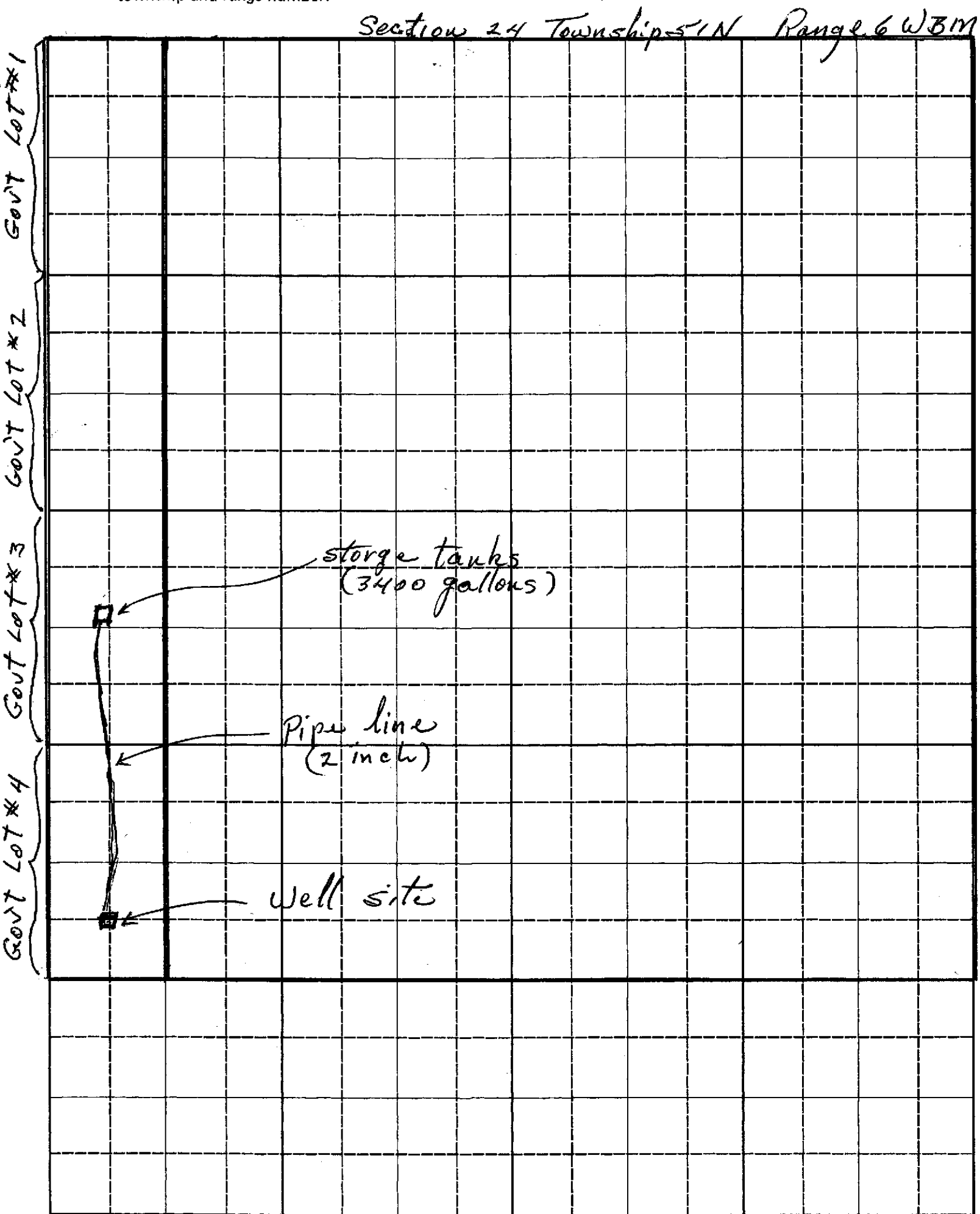
Property is being sold in parts

home sites. Minimum parcels of 5 acres.

- | | |
|---------|-------------------------------|
| Remarks | This well was drilled in 1975 |
|---------|-------------------------------|

Washington.

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.

State Line Water Association, Inc.
Richard W. Dunlap, Pres.
(Applicant)

RECEIVED

Proposed Priority 4/27/84

UNRECORDED

Received by Mr. [Signature] Date 4/27/84 Time 8:50 AM
Preliminary check by ST Fee \$ 30.00
Received by Mr. [Signature] Date 4/27/84 (3:50 PM)
Publication prepared by Mr. [Signature] Date 5/3/84
Published in Western Water News
Publication dates 5/10 & 17/84
Publication approved Mr. [Signature] Date 5/29/84
Protests filed by: None
Copies of protests forwarded by _____
Hearing held by _____ Date _____
Recommended for approval denial by 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. 95-8439, 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 June 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.
The issuance of this permit in no way grants any right-of-way or easement across the land of another.

Witness my hand this 4th day of June, 1984.

D. Allen Saylor
Chief, Operations Bureau

AFFIDAVIT OF PUBLICATION

STATE OF IDAHO,
County of Kootenai, } ss.

Carol Nedge

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 *three* issue of said newspaper for *2* consecutive *weeks*, commencing on the *10* day of *May*, 19*84*, and ending on the *17* day of *May*, 19*84*, 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 Nedge

Subscribed and sworn to before me this *17* day of *May*, 19*84*.

Roberta Frank
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:

95-8439

STATE LINE WATER ASSN. INC.

403 S. 11TH ST. # 7 COEUR D ALENE, ID 83814

Source: GROUNDWATER

Date Filed: 04/27/1984

Diversion Pt: LOT 04 (SWSW)

Sec 24 T 51N R 06W

Use: IRRIGATION (0.20 CFS);

DOMESTIC (0.14 CFS)

In: LOT 01 (NWNW) LOT 02

(SNNW) LOT 03 (NWSW) LOT 04

(SWSW) Sec 24 T 51N R 06W FOR

75 ACRES

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 May 29, 1984.

KEN DUNN, Dir.

Legal 359

May 10, 17, 1984

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MAY 18 1984

Department of Water Resources
Northern District Office

September 5, 1991

STATE LINE WATER ASSN. INC.
W. 6805 PRAIRIE AVE.
POST FALLS ID 83854

RE: WATER RIGHT NO. 95-08439

Dear Water Right Holder(s):

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

Sincerely,

SHARLA CURTIS
Technical Records Specialist

SC:blm

Enclosure

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OCT 07 1991

August 15, 1991

STATE LINE WATER ASSN. INC.
W. 6805 PRAIRIE AVE.
POST FALLS, ID 83854

RE: WATER RIGHT NO. 95-08439

Dear Water Right 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,

SHARLA CURTIS
Technical Records Specialist

SC:blm

Enclosure

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LICENSE REVIEW CHECKLIST

Permit No. 95-8439

Name/Address change? ok ✓

Priority date Advance? yes no ✓
Memo to advance no ✓
Order to reinstate needed? yes no ✓

Total cfs Limited by fee OK
Limited by capacity no

Total volume Limited by flow no
Chart checked for AF rate/ac 3.5 ✓

Capacity Actual measurement checked no
Theoretical checked no
If greater than permit, check for other rts no

Source Changed? yes no ✓
If so, is memo needed to clarify? no

P/D Verify with map no permit no ✓
More than one per NA Remember remark no
Check p/d overlap NA

Uses Check irrigation period of use w/ chart 4/1-11/1

P/U Verify with map no permit no ✓
> 5 acres irrigated, run overlap NA

Remarks More than one p/d in NA
Description of non-irrig uses no ✓
Special overlap condition no

Conditions -

Measuring device no
W.Master control no
Overlap no
Water quality no
Other no

Dates/Misc. -

Water Dist no
App Rec'd no
Proof Rec'd no

CHECK FOR ADJ. CLAIM

Needed according to proof filed no
Filed - needs amended no
Add'l fee required no
Not filed - no
Not needed no ✓

Comments/Changes to Examiner's Recommendations:

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License no 10-day no 30-day no

Back of field report signed? no
Reviewed no Date 8/12/91 Review time 6 min.

Right of Way
Condition Not Reg'd on hicc 8/30/91

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

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JUN 28 1991

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 95-08439

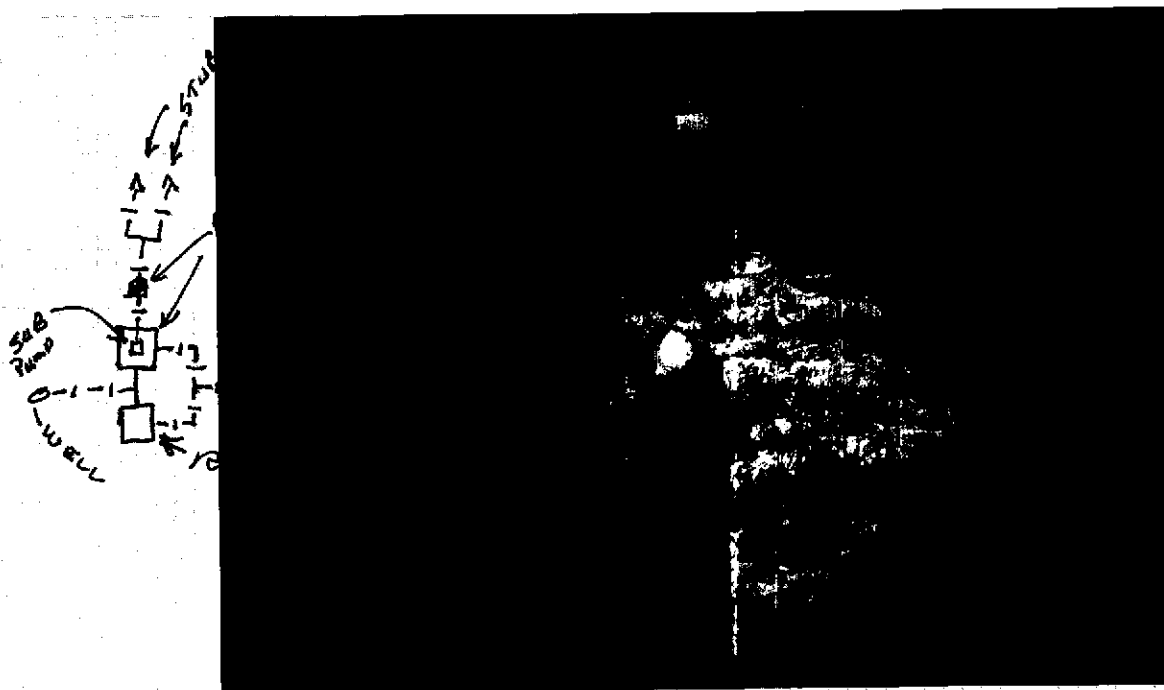
1. Owner: State Line Water Assn. Phone No. 723-7765
Current Address: W. 6805 Prairie Prairie Ave. Post Falls Id 83854
2. Accompanied by: Mrs Charlotte Ogilvie EXAM. DATE: 12-17-90
Address: SAME Phone No. SAME
Relationship to Permit Holder: SEC/TREAS
3. Source: GROUND WATER tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: 95-08166 ☐ Copies Attached
2. Other water rights with same point of diversion: 95-08166 ☐ 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



Scale: 1" = NTS

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

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED
JUN 28 1991

Department of Water Resources
Permit No. 95-08439

A. GENERAL INFORMATION

1. Owner: SE

Current Addr

2. Accompanie

Address: SA

Relationshi

3. Source: GA

7765
1/2 id 83854
7.90
5

B. OVERLAP RE

1. Other water r

Copies Attached

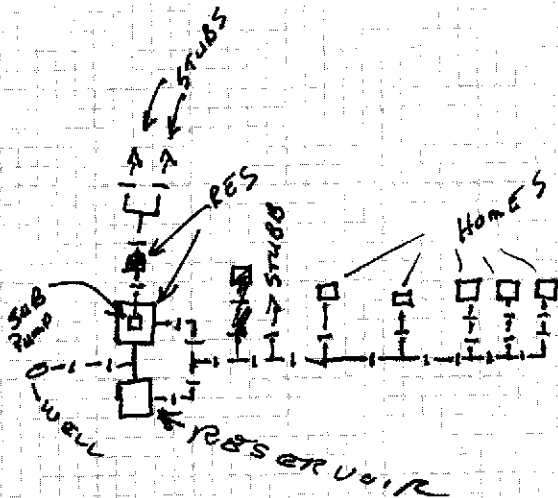
2. Other water r

Id Exam's Attached

C. SYSTEM DES

1. Diversion Sy:
size/ditch size

ents. Indicate weir



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Scale: 1" = NTS

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2. ☐ Copy of U.S.G.S. Quadrangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required).

☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater.

- ☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).

System Description (continued)

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

An Eight inch by 300 foot well with static water level at 124½ feet, a submersible 3 h. p. Pioneer pump and buried two inch pipeline to two 1500 gallon Reservoirs with gravity flow two inch main and five one inch laterals to homes and three stubs.

☐ 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
	PIONEER	3	348M5651616		2"

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

5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	¼	¼	¼	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
		NE	SW	SW	24	51N	6W	KOOTENAI	MAP

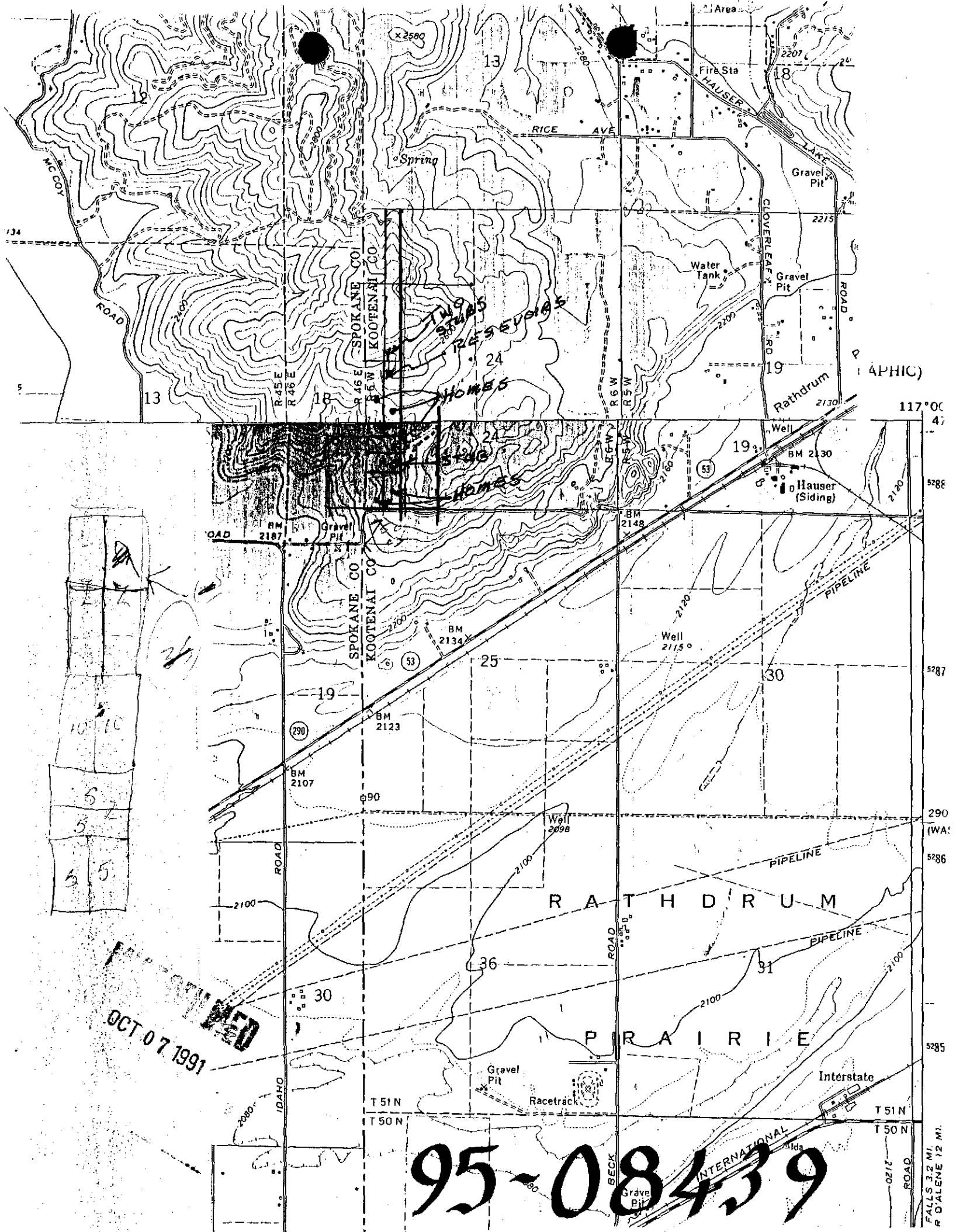
6. Place(s) of Use:

Indicate Method of Determination MAP

Twp.	Rge.	Sec.	NE¼				NW¼				SW¼				SE¼				Totals
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
51N	6W	24							0 ½			0 ½	0 1						2

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134

5

117°00' 47"

5286

5287

290 (WA)

5286

5285

FALLS 3.2 MI.
R D'ALENE 12 MI.

- 10 10
- 6 2
- 5 2
- 5 5

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95-08439

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:

$$\frac{8.8(3) 10\%}{240} = 0.08 \text{ cfs}$$

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:

$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = \frac{2}{1.75} \times 3.5 = 3.5$

$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = 3.5 \times 107 = 374.25$

$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 3.5$

2. Volume Calculations for Other Uses:

8 Homes = 4.8 AF

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H. REMARKS AND OVERLAP REVIEW ANALYSIS

TWO OF THE HOMES NOT YET BUILT ARE ABOVE THE CURRENT RESERVOIR. RESPONSIBLE PUMP IS TO BE INSTALLED IN THE RESERVOIR AND THE WATERPUMPED TO AN ADDITIONAL RESERVOIR WHICH IS UNDER CONSTRUCTION.

NOT TO EXCEED 0.08 cfs WHEN COMBINED / 95-08166

NOT TO EXCEED 7 HOMES WHEN " " " "

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (ata)
	From	To		
IRRIGATION	4/1	11/1	0.04	3.5
DOMESTIC (8)	1/1	12/31	0.08	4.8
Totals:			0.08	8.3

2. Recommended Amendments

- ☐ Change P.D. as reflected above
- ☐ Add P.D. as reflected above
- ☐ Change P.U. as reflected above
- ☐ Add P.U. as reflected above

J. AUTHENTICATION

Field Examiner's Name Tom D. King

Signature Tom D. King

Certification Date 7/16/90

Field Report Preparation Date 12/17/90



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

OCT 02 1991

State of Idaho
Department Of Water Resources
WELL INSPECTION FORM

If well is associated with water right, provide WR Permit No. 95-08459

Otherwise provide legal description and a sketch map and/or address so that the well can be located easily.

1. Legal Description of Well Location:

Twp. _____ N, Rge. _____ Sec. _____, _____ $\frac{1}{4}$ _____ $\frac{1}{4}$ Gov. Lot _____

2. Owner: _____

Address: _____,

City _____, State _____

3. Casing $\geq$ 12 inches above ground: Yes _____ No ☒

4. Access Port: Y ☒ N _____ Static Water Level: 124 1/2
Pressure Gauge: Y _____ N ☒ Casing Diameter: 8
Flowing: Y _____ N ☒ Temperature: ✓

5. Are there any obvious construction problems that may be a source for contamination or waste of water: Y _____ N ☒

If answer to Item 5 is Yes, describe in remarks and attach photo.

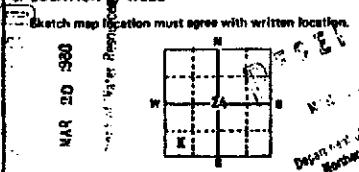
Remarks : _____

MICROFILMED

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WELL DRILLER'S REPORT

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

1. WELL OWNER Name <u>MARVIN WRIGHT/REX PHILIPS</u> Address <u>E. 10412 16th Ave.</u> <u>Spokane, Wash. 99206</u> Owner's Permit No. _____		7. WATER LEVEL Static water level <u>124 1/2</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow <u>70</u> Temperature <u>59</u> ° F. Quality _____ Artesian closed in pressure _____ p.s.i. Controlled by ☐ Valve ☐ Cap ☐ Plug																																																																																																																																																																																																	
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (Describe method of abandoning) _____		8. WELL TEST DATA ☐ Pump ☐ Sailer ☒ Other <table border="1"> <tr> <th>Discharge (G.P.M.)</th> <th>Draw Down</th> <th>Hours Pumped</th> </tr> <tr> <td>70</td> <td>100 ft</td> <td>1 hr</td> </tr> </table>		Discharge (G.P.M.)	Draw Down	Hours Pumped	70	100 ft	1 hr																																																																																																																																																																																										
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5. WELL CONSTRUCTION Diameter of hole <u>8</u> inches Total depth <u>300</u> feet Casing schedule: ☒ Steel ☐ Concrete <table border="1"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>.270</u> inches</td> <td><u>8</u> inches</td> <td><u>1 1/2</u> feet</td> <td><u>57 1/2</u> feet</td> </tr> <tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr> <tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr> <tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr> <tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr> </tbody> </table> Was a pecker or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches <table border="1"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr> <tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr> <tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr> </tbody> </table> Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No Size of gravel _____ Placed from _____ feet to _____ feet Surface seal? ☒ Yes ☐ No To what depth <u>57 1/2</u> feet Material used in seal ☐ Cement grout ☒ Pudding clay		Thickness	Diameter	From	To	<u>.270</u> inches	<u>8</u> inches	<u>1 1/2</u> feet	<u>57 1/2</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet																																																																																																																																																														
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6. LOCATION OF WELL Sketch map location must agree with written location.  County <u>Kootenai</u> <u>SW 1/4 NW 1/4 Sec 24 T. 34 N. R. 6 E/W</u>		10. Work started <u>Sept. 8 1975</u> Finished <u>Sept. 22, 1975</u> DRILLER'S CERTIFICATION This well was drilled under my supervision and this report is true to the best of my knowledge. <u>SHIRLEY'S WELL DRILLING CO.</u> 39 Order's or Firm's Name Number <u>E 1606 Sharp, Box 4341, Spokane, WA. 99202</u> Address <u>5/ Jack F. Shirkgraf</u> 10/11/75 Signed By Jack F. Shirkgraf, Co-Partner Date																																																																																																																																																																																																	

USE ADDITIONAL SHEETS IF NECESSARY FORWARD THE WHITE, BLUE, AND PINK COPIES TO THE DEPARTMENT

MICROFILMED

OCT 07 1991

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES
Northern Region Office

1910 Northwest Blvd. * Suite 210 * Coeur d'Alene, Id. * 83814 * (208) 765-4639

Cecil D. Andrus
Governor

R. Keith Higginson
Director

December 5, 1990

Ms. Charlotte G. Oglevie
State Line Water Assn.
W. 6805 Prairie Ave.
Post Falls, Id. 83854

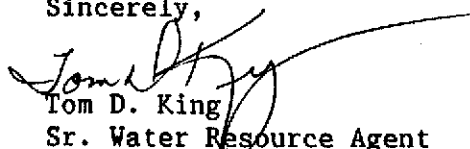
Re: Permit # 95-08439

Dear Permit Holder:

The final step in developing a water right is to have the system examined by an authorized water rights examiner. The system must be in use during the examination, so you or your representative must be on hand to demonstrate the system to the examiner.

I have been unable to contact you by telephone to schedule an appointment for the required examination, so I have tentatively scheduled you for Wednesday, December 12, 1990, at 2:30 PM. If this is not a convenient time for you, please contact this office to schedule a different time and date for the appointment, prior to December 10, 1990.

Sincerely,


Tom D. King
Sr. Water Resource Agent

BECK RD

BRN House



OCT 07 1991



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

State Line Water Assn. Inc.
W. 6805 Prairie Ave.
Post Falls, Id. 83854

RECEIVED
MAY 22 1989

Re: 95-8439

Department of Water Resources

Gentlemen:

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

MICROFILMED

JUN 15 1989

Celebrate
IDAHO
1890 • CENTENNIAL • 1990

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 95-8439

Date: 4/25/89

General Considerations:

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

Source of Water:

 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

RECEIVED

APR 14 1989

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

For Office Use Only

Fee Received \$50.00

Date 4/17/89

Receipt # 0096354

Receipt by *JP*Reviewed by *JP*Sent to region *JP*

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 No. 95-08439Name(s) of Permit Holder: State Line Water Association, Inc.Post Office Address: W. 6805 Prairie Ave.Post Falls, Idaho 83854 Telephone No. 773-7765Source of Water: Well

Extent of Use:

Domestic 9 (number of households) Stockwater _____ (number and type of stock)

Irrigation _____ (acres) Other/Remark _____

Total rate and/or volume for which proof is submitted 0.04 0.20 cfs _____ acre-feetShow the date water was first diverted and beneficially used under this permit: August 1, 1984Measuring Device: Required? ☐ Yes ☒ No
Installed? ☐ Yes ☒ NoFee enclosed \$ 50.00
(See License Examination Fee Schedule)Flow Measurement Port: Required? ☐ Yes ☒ No
Installed? ☐ Yes ☒ No

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

Charlotte G. Oglevie Sec/Treas. 773-7765
(Name) (Telephone Number)W. 6805 Prairie Ave., Post Falls, Idaho 83854
(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.

MICROFILMEDApril 6, 1989
DateAugust A. Lohs President
Signature of Permit Holder (and title, if appropriate)JUN 15 1989

* Per App. for Permit

STATE LINE WATER ASSOC.
W 6805 PRAIRIE AVE
POST FALLS ID 83854

March 31, 1989

128130

PROOF DUE NOTICE

RE: PERMIT NO. 95-08439

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 June 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

JUN 15 1989

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
COMMENCEMENT OF WORKS

Permit No. 95-8439

Name(s) of Permit Holder(s): STATELINE WATER ASSN

Post Office Address: 409 S. 11TH A W. 6805 PRAIRIE AVE
POOT FALLS, ID 83854

☐ I hereby certify that construction of diversion works on the above referenced permit began on 4/27/87. 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 Departmental Control*:

Northern District Office

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

3/13/87
Date

Charlotte S. Ogden
Signature of Permit Holder

PLACE
STAMP
HERE

RECEIVED

MAR 18 1987

MICROFILMED

JUN 15 1989



Department of Water Resources

IDAHO DEPARTMENT OF WATER RESOURCES
STATEHOUSE
BOISE, IDAHO 83720

June 26, 1984

RE: Permit No. 95-8439

State Line Water Assoc.
403 S. 11th St. Apt. #7
Coeur d'Alene, ID 83814

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 a form entitled "Instructions for 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

RECEIVED
JUL 1 1984
WATER ALLOCATION SECTION

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: [Signature]

APPLICATION NUMBER: 95-8439

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 Platted by: _____ Map No. _____
☐ Yes ☐ No Other rights on same place of use. _____
☒ Yes ☐ No* In form for advertising.
Final date for protests: May 29, 1984
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 5/18/84
☒ 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? _____
☒ 4/27/84 Date of priority recommended.
Special conditions of approval or cover letter. _____

By: [Signature]

Date: 5/29/84

STATE OFFICE REVIEW:

L17

26 04

- ☐ See attached sheet for more information.

By: [Signature]

Date: 6-1-84

RECEIVED

MAY 31 1984

Department of Water Resources

POINT OF DIVERSION AND STREAM INDEX INFORMATION

TRACT	SEC	TWP	RGE	gov't lot	rediv. (R)	REACH
IDAHO STREAM CODE INDEX						

TRACT	SEC	TWP	RGE	gov't lot	rediv. (R)	REACH
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TRACT	SEC	TWP	RGE	gov't lot	rediv. (R)	REACH
IDAHO STREAM CODE INDEX						

95-8439_

STATE LINE WATER ASSN. INC.

403 S. 11TH ST. #7, COEUR D'ALENE, ID 83814

Source: GROUNDWATER

Date Filed: 04/27/1984

Diversion Pt: LOT 04 (SWSW) Sec 24 T 51N R 06W

Use: IRRIGATION	(0.20 CFS)
DOMESTIC	(0.14 CFS)

In: LOT 01 (NWNW) LOT 02 (SWNW) LOT 03 (NWSW) LOT 04 (SWSW)
Sec 24 T 51N R 06W FOR 75 ACRES

RECORDED
04/27/1984