

AFFIDAVIT OF PUBLICATION

RECEIVED
JUN 10 1983

STATE OF IDAHO,
County of Kootenai, } ss.

Cause Hedge

being first duly sworn
Department of Water Resources
Northern District Office

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 issue of said newspaper for 2 consecutive weeks, commencing on the 9 day of June, 1983, and ending on the 16 day of June, 1983, and such publication was made as often during said period as said 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.

Cause Hedge

Subscribed and sworn to before me this 16 day of June, 1983.

Roberta Dransky
Notary Public for the State of Idaho,
residing at Coeur d'Alene, Idaho.

LEADER

NOTICE OF APPLICATION FOR WATER RIGHT

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

95-8318
HULL, PAUL F.
STAR RT., COEUR D'ALENE, ID 83814

Source: GROUNDWATER
Date Filed: 05/26/1983
Diversion Pt: SWNW Sec 01 T 49N R 04W
Use: STOCKWATER (0.01 CFS); DOMESTIC (0.02 CFS)
In: SWNW Sec 01 T 49N R 04W

95-8317
DOWNING, RAY &/or NANCY
STAR RT., COEUR D'ALENE, ID 83814

Source: GROUNDWATER
Date Filed: 05/27/1983
Diversion Pt: NESW Sec 02 T 49N R 04W
Use: DOMESTIC (0.04 CFS)
In: NESW Sec 02 T 49N R 04W

95-8319
KUKURUZA, PHILIP
E. 4320 HUDLOW RD., HAYDEN LAKE, ID 83835

Source: GROUNDWATER
Date Filed: 05/23/1983
Diversion Pt: NWSE Sec 29 T 52N R 03W
Use: DOMESTIC (0.04 CFS)
In: NWSE Sec 29 T 52N R 03W

95-8319
NAKATA, HERBERT M.
N.W. 335 JANET ST., PULLMAN, WA 99163

Source: COEUR D'ALENE LAKE trib. to SPOKANE RIVER
Date Filed: 05/31/1983
Diversion Pt: LOT 03 Sec 23 T 48N R 04W
Use: DOMESTIC (0.02 CFS)
In: LOT 03 Sec 23 T 48N R 04W

95-8320
GOODWARD, HERMAN LEE
GOODARD, JANET

N. 12400 THREE FORK RD., POST FALLS, ID 83854
Source: SPRING trib. to HAUSER CREEK; HAUSER CREEK trib. to HAUSER LAKE
Date Filed: 05/31/1983
Diversion Pt: NWSE NESE Sec 30 T 52N R 05W
Use: IRRIGATION (0.10 CFS); DOMESTIC (0.04 CFS)
In: NESE Sec 30 T 52N R 05W FOR 5 ACRES

95-8321
AVONDALE IRRIGATION DIST.
P. O. BOX 81, HAYDEN LAKE, ID 83835
Source: GROUNDWATER
Date Filed: 05/31/1983
Diversion Pt: NWSE Sec 14 T 51N R 04W
Use: IRRIGATION (0.20 CFS); STOCKWATER (0.02 CFS); DOMESTIC (0.05 CFS)
In: NWNE Sec 13 T 51N R 04W FOR 20 ACRES

The permit(s) will be subject to all prior water rights. Protests must be filed with the Director, Dept. of Water Resources, 4355 Gov't Way, Coeur d'Alene, Id, 83814 on or before JUNE 27, 1983.

KEN DUNN, Dir.

Legal 49
June 9, 1983

MICROFILMED

MICA BAY
IDAHO-KO
7.5 MINUTE SERI
SE/4 CREEK D'ALE

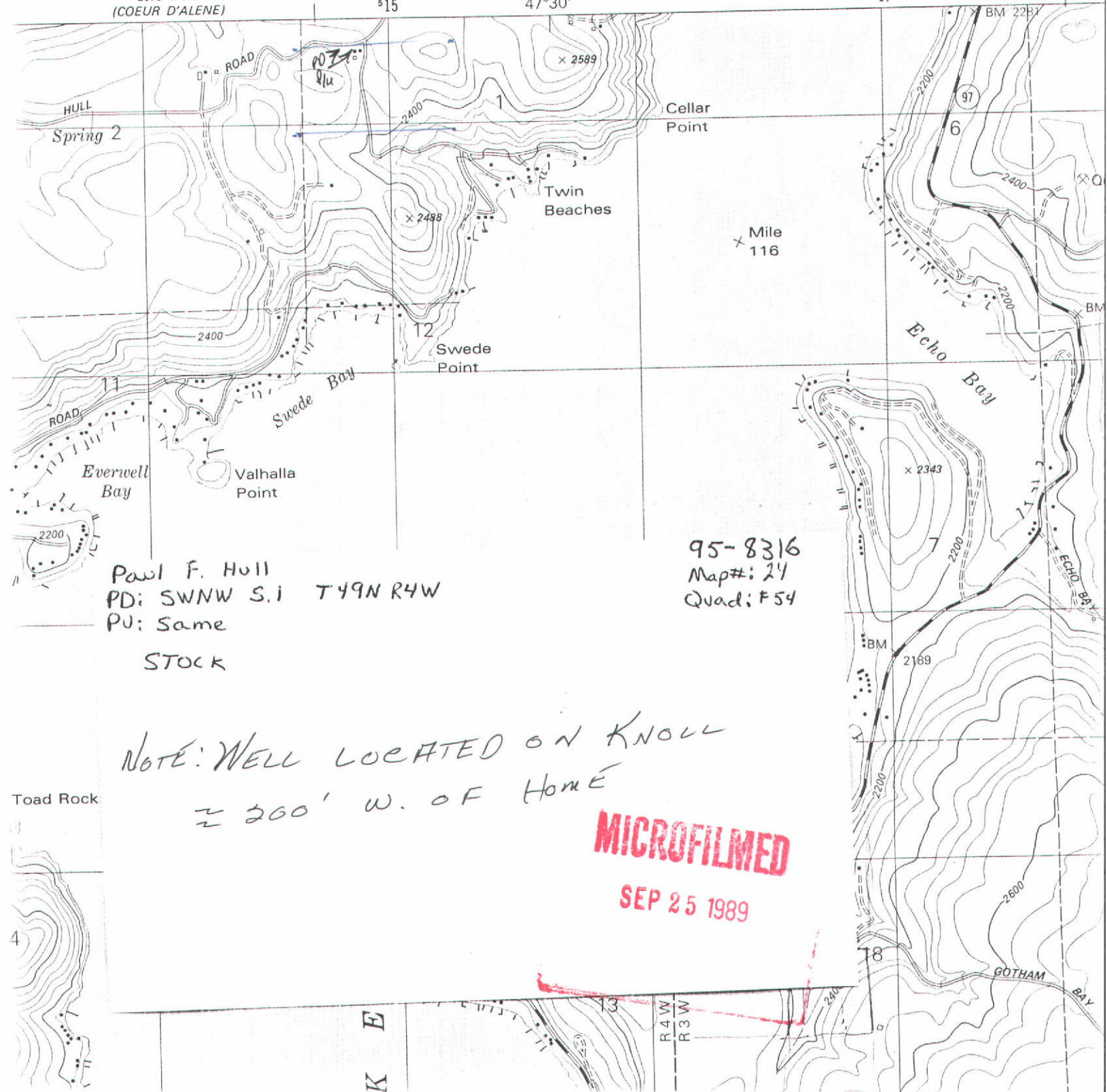
2679 III NE
(COEUR D'ALENE)

15

47°30'

17

250 000 FEET



Paul F. Hull
PD: SWNW S.1 T49N R4W
PU: Same

STOCK

95-8316
Map#: 21
Quad: F54

NOTE: WELL LOCATED ON KNOLL
~ 200' W. OF HOME

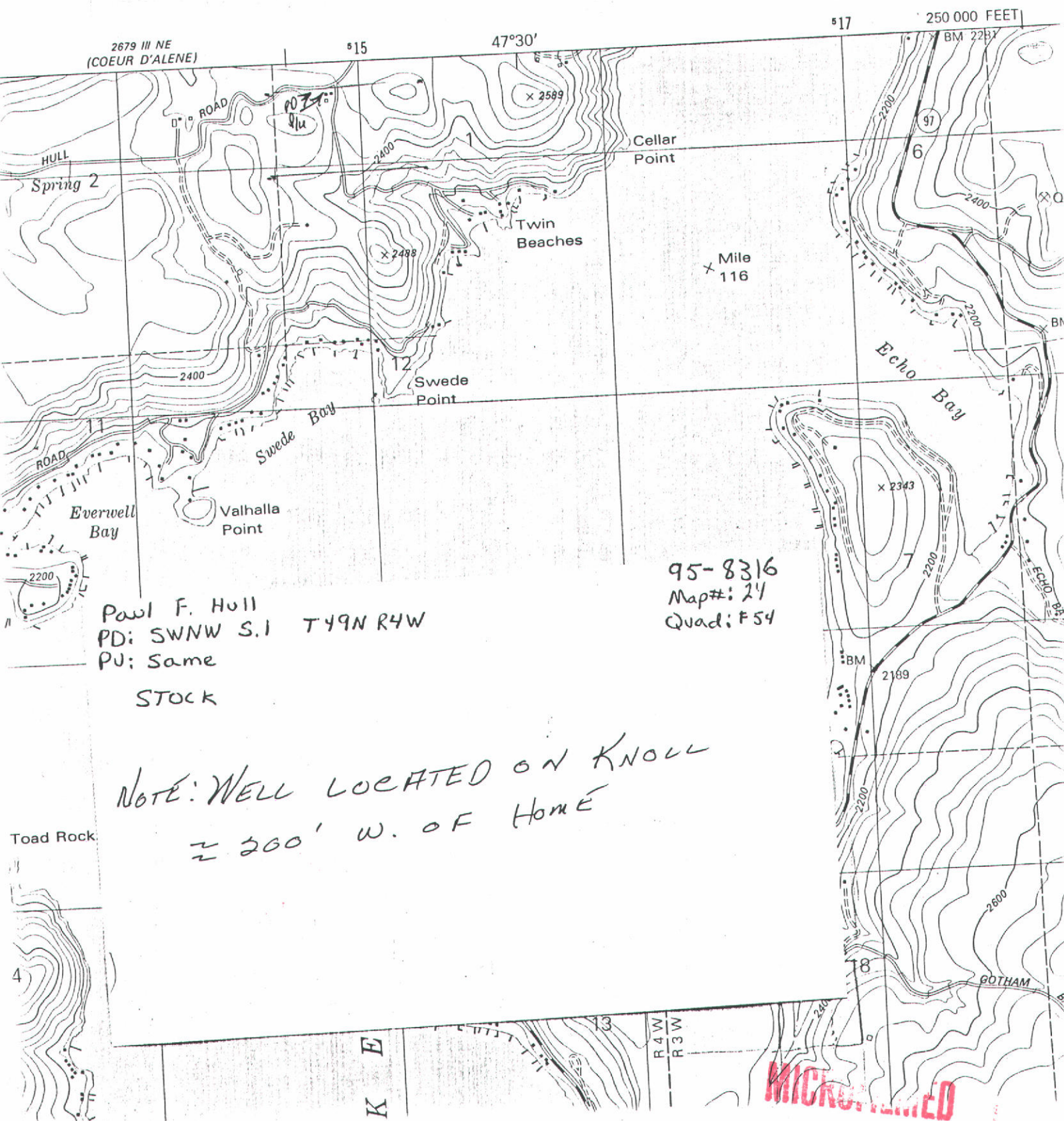
MICROFILMED

SEP 25 1989

K E

R4W
R3W

MICA BAY (IDAHO-KO
7.5 MINUTE SERI
SE/4 CREEK D'ALE



MICROFILMED

SEP 25 1989

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

USE TYPEWRITER OR
BALLPOINT PEN

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>Paul Hull</u> Address <u>Star Route CDA, Idaho 83814</u> Owner's Permit No. _____	7. WATER LEVEL Static water level <u>30</u> feet below land surface Flowing? ☐ Yes ☒ No Artesian closed in pressure ☐ Yes ☒ No Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature <u>cold</u> Quality <u>good</u> Describe artesian or temperature zones below																																																																								
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge C.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td><u>3 GPM</u></td> <td></td> <td></td> </tr> </tbody> </table>	Discharge C.P.M.	Pumping Level	Hours Pumped	<u>3 GPM</u>																																																																				
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection (specify type) ☐ Other	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th rowspan="2">Water Yes No</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>6</td> <td>0</td> <td>32</td> <td>Decomposed granite</td> <td>x</td> </tr> <tr> <td>6</td> <td>32</td> <td>33</td> <td>soft seam</td> <td>x</td> </tr> <tr> <td>6</td> <td>33</td> <td>62</td> <td>decomposed granite</td> <td>x</td> </tr> <tr> <td>6</td> <td>62</td> <td>74</td> <td>fine green granite</td> <td>x</td> </tr> <tr> <td>6</td> <td>74</td> <td>76</td> <td>broken seam</td> <td>x</td> </tr> <tr> <td>6</td> <td>76</td> <td>84</td> <td>green granite</td> <td>x</td> </tr> <tr> <td>6</td> <td>84</td> <td>86</td> <td>broken seam</td> <td>x</td> </tr> <tr> <td>6</td> <td>86</td> <td>106</td> <td>black & white granite</td> <td>x</td> </tr> <tr> <td>6</td> <td>106</td> <td>119</td> <td>quartz seam</td> <td>x</td> </tr> <tr> <td>6</td> <td>119</td> <td>152</td> <td>black & white</td> <td>x</td> </tr> <tr> <td>6</td> <td>152</td> <td>156</td> <td>quartz seam</td> <td>x</td> </tr> <tr> <td>6</td> <td>156</td> <td>173</td> <td>black & white granite hard</td> <td>x</td> </tr> <tr> <td>6</td> <td>173</td> <td>280</td> <td>black granite</td> <td>x</td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water Yes No	From	To	6	0	32	Decomposed granite	x	6	32	33	soft seam	x	6	33	62	decomposed granite	x	6	62	74	fine green granite	x	6	74	76	broken seam	x	6	76	84	green granite	x	6	84	86	broken seam	x	6	86	106	black & white granite	x	6	106	119	quartz seam	x	6	119	152	black & white	x	6	152	156	quartz seam	x	6	156	173	black & white granite hard	x	6	173	280	black granite	x
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Aug ☐ Other	10. Work started <u>4/27/83</u> finished <u>4/30/83</u>																																																																								
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>250</u> inches</td> <td><u>6</u> inches</td> <td><u>1</u> feet</td> <td><u>20</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> </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 <table border="1" style="width: 100%; border-collapse: collapse;"> <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 _____ Model No. _____ Type _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No Size of gravel _____ feet Placed from _____ feet to _____ feet Surface seal depth <u>18</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding clay 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>none</u>	Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>20</u> 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	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>Murphy Drilling Co.</u> Firm No. <u>269</u> Address <u>East 17220 Linke Road</u> <u>5/4/83</u> <u>Greenacres, Wa. 99016</u> Signed by (Firm Official) <u>BE Murphy</u> and <u>BE Murphy</u> (Operator)																																								
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6. LOCATION OF WELL Sketch map location must agree with written location. Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> Sec. <u>1</u> T. <u>49</u> N. R. <u>4</u> E. W.	USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT																																																																								

MICROFILMED
AUG 18 1983

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 95-08316

Priority: May 26, 1983

Maximum Diversion Rate:
Maximum Diversion Volume:¹

0.02 CFS
1.4 AF

This is to certify, that PAUL F. HULL
2805 HULL RD.

COEUR D'ALENE, ID 83814 has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated May 26, 1983; and has submitted Proof of Beneficial Use on June 3, 1988. An examination indicates that the works have a diversion capacity of .020 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>
STOCKWATER	01/01 to 12/31	0.01 CFS	0.2 AF
DOMESTIC	01/01 to 12/31	0.02 CFS	1.2 AF
	Totals	0.02 CFS	1.4 AF

LOCATION OF POINT(S) OF DIVERSION:

SWNW, Sec. 1, Township 49N, Range 04W
KOOTENAI County

PLACE OF USE: STOCKWATER

TWN RGE SEC

49N 04W 1 SWNW

PLACE OF USE: DOMESTIC, same as STOCKWATER 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 reflect cropping patterns or acceptable standards of water delivery 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 1 home.

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 4TH day of August, 1989.

MICROFILMED

Acting for

R. Keith Higginson, Director

SEP 25 1989

TW

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 PAUL F. HULL Phone 208/664-6436
Post office address STAR RT. COEUR D'ALENE, IDAHO 83814
2. Source of water supply GROUND WATER which is a tributary of N/A
3. Location of point of diversion is SW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Section 1 Township 49 N
Range 4 W B.M. KOOTENAI County, additional points of diversion if any: _____

4. Water will be used for the following purposes:

- Amount 0.02 cfs for DOMESTIC purposes from JAN 1 to DEC. 31 (both dates inclusive)
(cfs or acre-feet per annum)
- Amount 0.01 for 15 HD. LIVESTOCK WATERING 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. 0.02 cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

- a. Description of ditches, flumes, pumps, headgates, etc. FEET DEEP WELL WITH 10 GPM SUBMERSIBLE PUMP AND 1 1/2" PIPBLING.
- 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 6 inches; proposed depth of well is 280 feet.

7. Time required for the completion of the works and application of the water to the proposed beneficial

- ALLOW 1 YR RCT-15-83
use is COMPLETED years (minimum 1 year - maximum 5 years).
5/18/83

8. Description of proposed uses:

- a. If water is not for irrigation:
(1) Give the place of use of water: SW $\frac{1}{4}$ of NW $\frac{1}{4}$ of Section 1 Township 49 N
Range 4 W B.M.
- (2) Amount of power to be generated: N/A horsepower under _____ feet of head.
- (3) List number of each kind of livestock to be watered 15 HEAD HORSES AND RANGE CATTLE.
- (4) Name of municipality to be served N/A, or number of families to be supplied with domestic water 1 HOME.
- (5) If water is to be used for other purposes describe: LIMITED YARD WATERING.

MICROFILMED

●

10

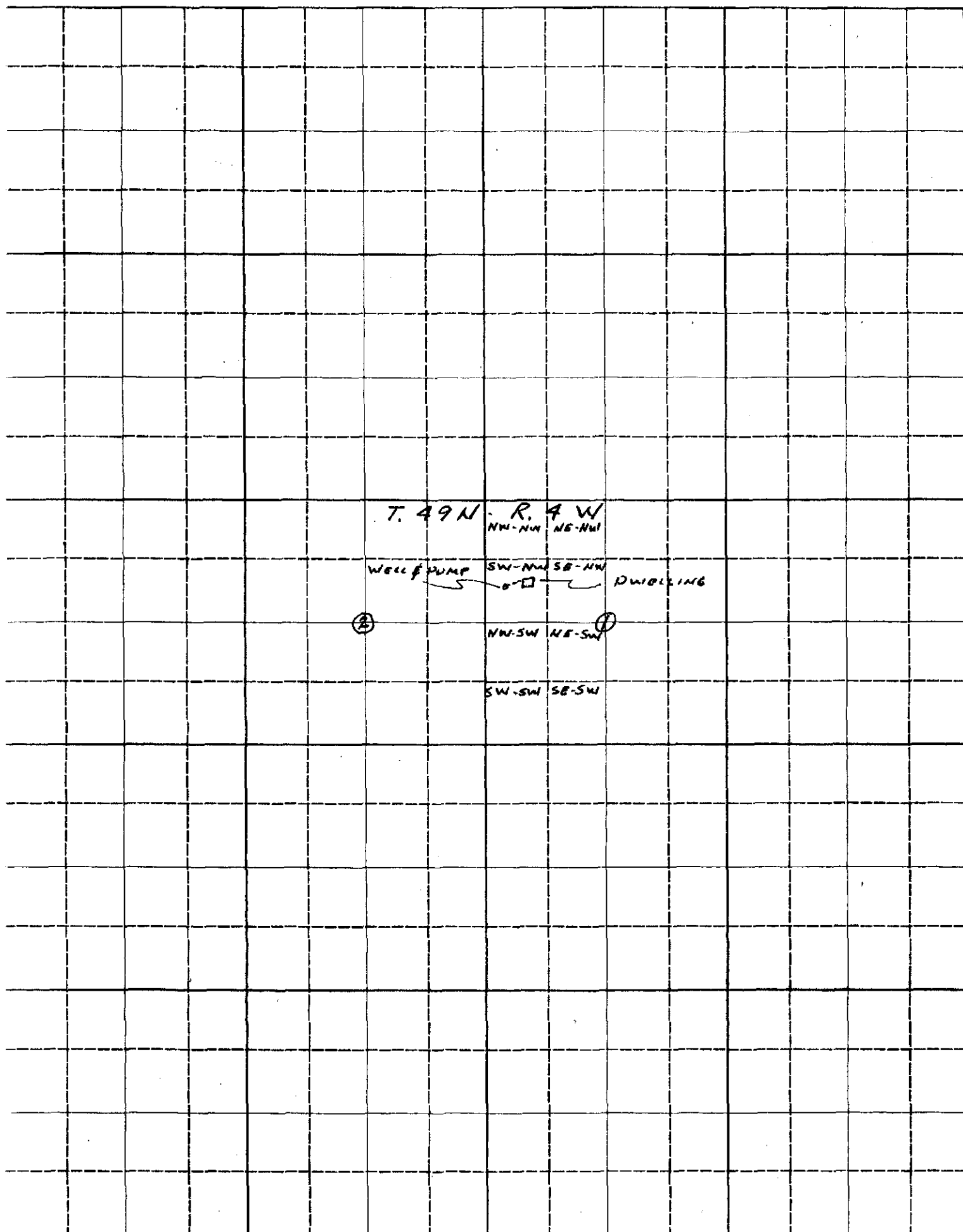
PAUL F. HULL

SAME

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text on the page.



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.

Paul F. Heell
(Applicant)

Proposed Priority 5-26-83

Received by KK Date 5/26/83 Time 1:30

Preliminary check by JK Fee \$ 30.00

Receipted by KK Date 5/26/83 27032

Publication prepared by KK Date 6/1/83

Published in Coeur d'Alene Press

Publication dates 6/9 - 6/10/83

Publication approved JB Date 8/27/83

Protests filed by: none

Copies of protests forwarded by _____

Hearing held by _____ Date _____

Recommended for approval denial by JB RC

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. 95-8316, 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 August 1, 19 88.
- 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:

Witness my hand this 20 day of July, 1983.

David R. Tutthill Jr.

Acting For L. GLEN SAXTON, Chief Operations Bureau

RECEIVED

AFFIDAVIT OF PUBLICATION

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Date Filed: 05/31/1983
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In: NESE Sec 30 T 52N R 05W
FOR 5 ACRES
95-8321
AVONDALE IRRIGATION DIST.
P. O. BOX 81, HAYDEN LAKE,
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Diversion Pt: NWSE Sec 14 T 51N
R 04W
Use: IRRIGATION (0.20 CFS);
STOCKWATER (0.02 CFS);
DOMESTIC (0.06 CFS)
In: NWSE Sec 13 T 51N R 04W
FOR 20 ACRES

The permit(s) will be subject
to all prior water rights. Protests
must be filed with the Director,
Dept. of Water Resources, 4255
Gov't Way, Coeur d'Alene, Id.
83814 on or before JUNE 27, 1983.
KEN DUNN, Dir.

Legal 49
June 9, 1983

STATE OF IDAHO,
County of Kootenai, } ss.

Cecil 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*

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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.

Cecil Hodge
Subscribed and sworn to before me this *16* day of *June*, 19*83*.

Roberta Stanley
Notary Public for the State of Idaho,
residing at Coeur d'Alene, Idaho.

LEADER

August 4, 1989

PAUL F. HULL
2805 HULL RD.
COEUR D ALENE, ID 83814

RE: PERMIT NO. 95-08316

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:sc

Enclosure

SEP 11 1989

POINT OF DIVERSION OVERLAP REVIEW

WR-NUMBER	TWP	RNG	SC	TRACT	LT	#SOURCE	#NAME
				1\4 1\4 1\4			
9508316	49N	04W	1	SW NW		GROUNDWATER	HULL, PAUL F.
NO MATCHES FOR THIS POD							

REPROFILMED

SLP 25 1989

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT SUPPLEMENT

JUNE 6 1989

REPORT OF AGENT/ENGINEER

YES NO

PERMIT NO. 95-8316

(☒) () B/U Acknowledgement Letter Sent _____ (INITIAL & DATE)

(☒) () Aerial Photo Date Requested _____ by _____

(☒) () Quad Sheet

() () GL Plat

() () Copies of overlapping License Field Report Claim

() () Photo PD/PU

() () Correspondence (Date) _____

() () Other (List) _____

EXAM COMPLETED BY _____ DATE _____

SR AGENT REVIEW _____ DATE _____

REGIONAL MANAGER REVIEW _____ *QMA* DATE 6/89

ENTERED ON COMPUTER BY _____ DATE 6/13/89

PRELIMINARY OVERLAP REVIEW BY *LS* DATE 8/2/88

(☒) NO OVERLAP FOUND

95-8316

DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE EXAMINATION
CHECKLIST

WATER RIGHT 95-8316

REVIEWER J King

DATE 9-2-89

[EACH RULE MUST BE CHECKED]

SEE FOOTNOTE FOR SYMBOLS

RULE 5 EXAMINATION FOR BENEFICIAL USE;

1,2. <u>/</u>	1,3. <u>/</u>	1,4. <u>/</u>	1,5. <u>/</u>
1,6. <u>/</u>	1,7. <u>/</u>	1,8. <u>/</u>	1,9. <u>/</u>
1,10. <u>/</u>	1,11. <u>/</u>	1,12. <u>/</u>	1,13. <u>/</u>
1,14. <u>/</u>	1,15. <u>/</u>	1,16. <u>/</u>	1,17. <u>/</u>

RULE 6 MEASUREMENT TERMINOLOGY;

1,1. <u>/</u>	1,2. <u>/</u>	2. <u>/</u>	3. <u>/</u>
4. <u>/</u>	5. <u>/</u>		

RULE 7 DRAWINGS, MAP, AND SCHEMATIC DIAGRAM;

1,1. <u>/</u>	1,2. <u>/</u>	1,3. <u>/</u>	1,4. <u>/</u>
1,5. <u>/</u>			

RULE 5,2. FIELD REPORT ACCEPTABILITY [STATE OFFICE REVIEW]

2,1. <u>/</u>	2,2. <u>/</u>	2,3. <u>/</u>	2,4. <u>/</u>
---------------	---------------	---------------	---------------

Reviewer

Date

N/A = NOT APPLICABLE
** = SEE ATTACHMENT NO.

* = SEE ITEM IN BENEFICIAL USE REP
*** = SEE REMARKS ATTACHED

RECEIVED
JUN 26 1989

Department of Water Resources

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No. 95-8316

1. Owner: PAUL F. HULL Phone No. 664-6436

Current Address: 2805 HULL RD. COEUR D'ALENE, ID.

2. Accompanied by: NONE EXAM. DATE: 8/25/88

Address: _____ Phone No. _____

Relationship to Permit Holder: _____

3. Source: GROUNDWATER tributary to _____

B. OVERLAP REVIEW

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

☐ Copies Attached

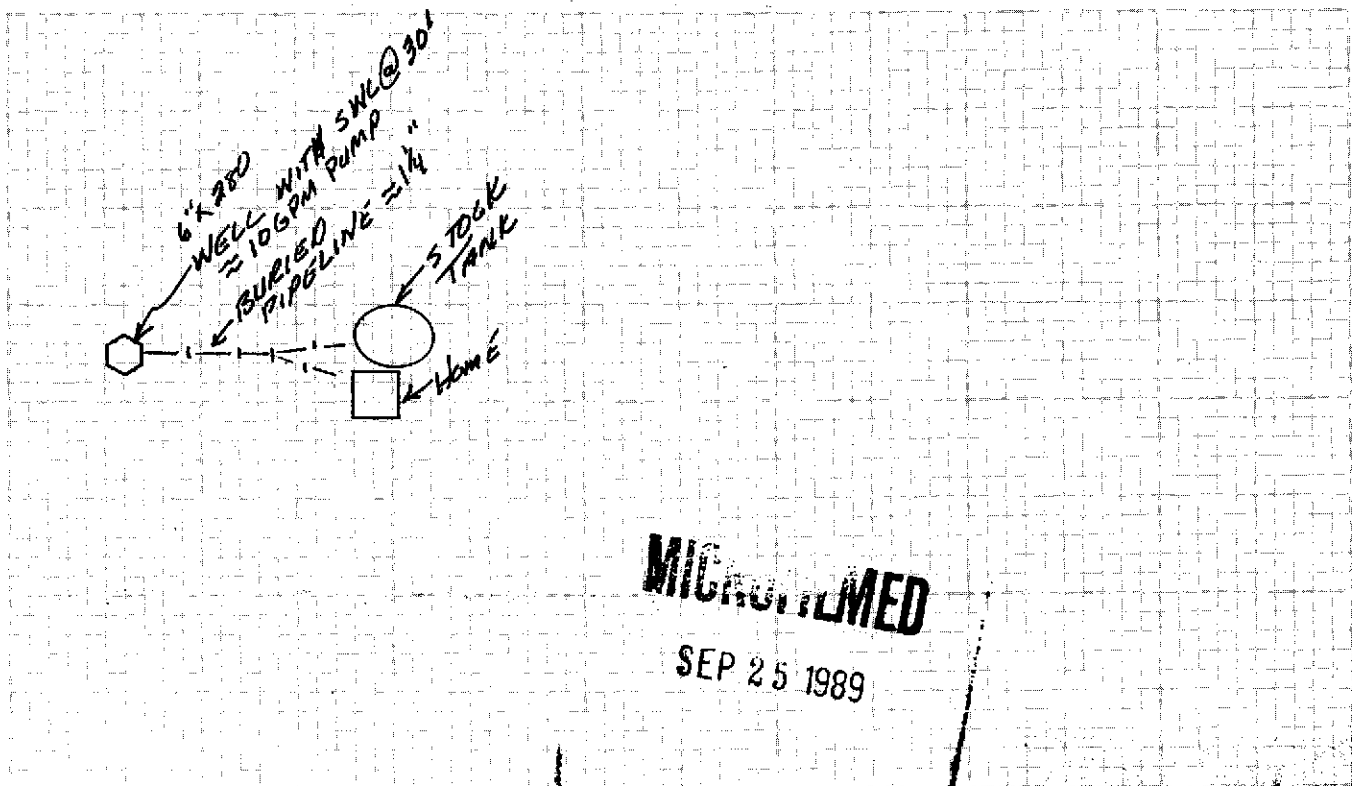
2. Other water rights with same point of diversion: NONE

☐ 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



Scale: 1" = _____

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).

JUN 26 1989

Department of Water Resources

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

6 x 280' WELL SUBMERSIBLE PUMP 134510 PIPELINE
10 HOME & STOCK TRUCKS

To Home & Stock Tanks

~~ACCORDING TO TERM, HOOPER 1 1/4" PIPELINE & PUMP RATED AT 10 GPM~~

☐ See Remarks on page 4 for continuation

4. 548E251BCE

Well or Diversion Identification No.*	41NR	41NRK	41NRK	41NRK	41NRK
Motor Make					
Hp					
Motor Serial No.					
Pump Make					
Pump Serial No. or Discharge Size					

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

5. Point(s) of Diversion:

[illegible]

6. Place(s) of Use:

Indicate Method of Determination

[illegible]

SE/4 CREEK D'AL.

250 000 FEET

BM 2282

10

Cellar
Point

Twin Beaches

* Mile
116

Swede
Point

Echo Bay

Everwell
Bay

Valhalla
Point

Paul F. Hull
PD: SWNW S.1 T49N R4W
PU: Same

STOCK

95-8316
Map#: 24
Quad: F54

NOTE: WELL LOCATED ON KNOLL
 ~ 200' W. OF HOME

MICROFILMED

SEP 25 1989

GOTHAM

R 4	W
R 3	W

Do not use this space

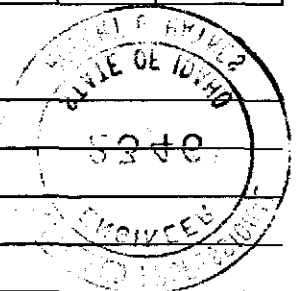
D. FLOW MEASUREMENTS *NONE*

☐ 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:

2. Alternate Method for Checking Purposes:

1 HOME = 0.04 cfs
15 STOCK = 0.02 cfs
0.02 / PERMIT

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:

1 HOME *01.2* *DOMESTIC USE*
15 STOCK *00.2* *INCLUDING STOCK*
 01.4 *& LAWN*

01.2 AF

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SEP 25 1989

INTEGRITY

18) mit Wert

H. REMARKS AND OVERLAP REVIEW ANALYSIS

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

USE TYPEWRITER OR
BALLPOINT PEN

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.

RECEIVED

1. WELL OWNER Name <u>Paul Hull</u> Address <u>Star Route CDA, Idaho 83814</u> Owner's Permit No. _____	7. WATER LEVEL MAY 6 1983 Static water level <u>30</u> Department of Water Resources Flowing? ☐ Yes ☒ No Surface flow Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature <u>cold</u>°F. Quality <u>good</u> Describe artesian or temperature zones below.																																																																																								
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Baller ☒ Air ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td>3 GPM</td> <td></td> <td></td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	3 GPM																																																																																				
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore 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>6</td><td>0</td><td>32</td><td>Decomposed granite</td><td></td><td>x</td></tr> <tr><td>6</td><td>32</td><td>33</td><td>soft seam damp</td><td>x</td><td></td></tr> <tr><td>6</td><td>33</td><td>62</td><td>decomposed granite</td><td></td><td>x</td></tr> <tr><td>6</td><td>62</td><td>74</td><td>firm green granite</td><td></td><td>x</td></tr> <tr><td>6</td><td>74</td><td>76</td><td>broken seam seep</td><td>x</td><td></td></tr> <tr><td>6</td><td>76</td><td>84</td><td>green granite</td><td></td><td>x</td></tr> <tr><td>6</td><td>84</td><td>86</td><td>broken seam</td><td></td><td>x</td></tr> <tr><td>6</td><td>86</td><td>106</td><td>black & white granite</td><td>x</td><td></td></tr> <tr><td>6</td><td>106</td><td>119</td><td>quartz seam</td><td></td><td>x</td></tr> <tr><td>6</td><td>119</td><td>152</td><td>black & white</td><td></td><td>x</td></tr> <tr><td>6</td><td>152</td><td>156</td><td>quartz seam</td><td></td><td>x</td></tr> <tr><td>6</td><td>156</td><td>173</td><td>black & white granite hard</td><td></td><td>x</td></tr> <tr><td>6</td><td>173</td><td>280</td><td>black granite</td><td></td><td>x</td></tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	6	0	32	Decomposed granite		x	6	32	33	soft seam damp	x		6	33	62	decomposed granite		x	6	62	74	firm green granite		x	6	74	76	broken seam seep	x		6	76	84	green granite		x	6	84	86	broken seam		x	6	86	106	black & white granite	x		6	106	119	quartz seam		x	6	119	152	black & white		x	6	152	156	quartz seam		x	6	156	173	black & white granite hard		x	6	173	280	black granite		x
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ 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>250 inches</td> <td>6 inches</td> <td>1 feet</td> <td>20 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 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 <table border="1" style="width:100%; border-collapse: collapse;"> <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 depth <u>18</u> Material used in seal: ☐ Cement grout ☐ Bentonite ☒ Puddling clay ☐ _____ 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>none</u>	Thickness	Diameter	From	To	250 inches	6 inches	1 feet	20 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 <u>must</u> agree with written location. N W S Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> 1/4 NW 1/4 Sec. 1, T. 49 N., R. 4 W.	10. Work started <u>4/27/83</u> finished <u>4/30/83</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>Murphy Drilling Co.</u> Firm No. <u>269</u> Address <u>East 17220 Linke Road</u> <u>Greenacres, Wa. 99016</u> Date <u>5/4/83</u> Signed by (Firm Official) <u>[Signature]</u> and <u>[Signature]</u> (Operator)																																																																																								

SEP 25 1989

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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. 49N, Rge. 4W,
Sec. 1, Qtr./Qtr. SWNW or Lot RJK
2. Owner PAUL F. HULL
Address 2805 HULL RD., City COEUR D'ALENE, State ID
3. Approx. date of well construction 4-27-83
Well Driller MURPHY DRILLING CO. #269
4. Casing: Diameter 6 Condition Good
5. Casing length above land surface 18" ±
6. Well depth (ft) 280 Flowing - Temp. -
Access port YES
7. Condition of piping and valving Good
8. Evidence of well seal NO
9. Shut in pressure or static water level 30'
10. Evidence of leakage around the casing NONE
11. Does well need repair NO
12. Comments _____

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SEP 25 1989

(OVER)

JUN 6 1989

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.

SEE ATTACHED

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SEP 25 1989

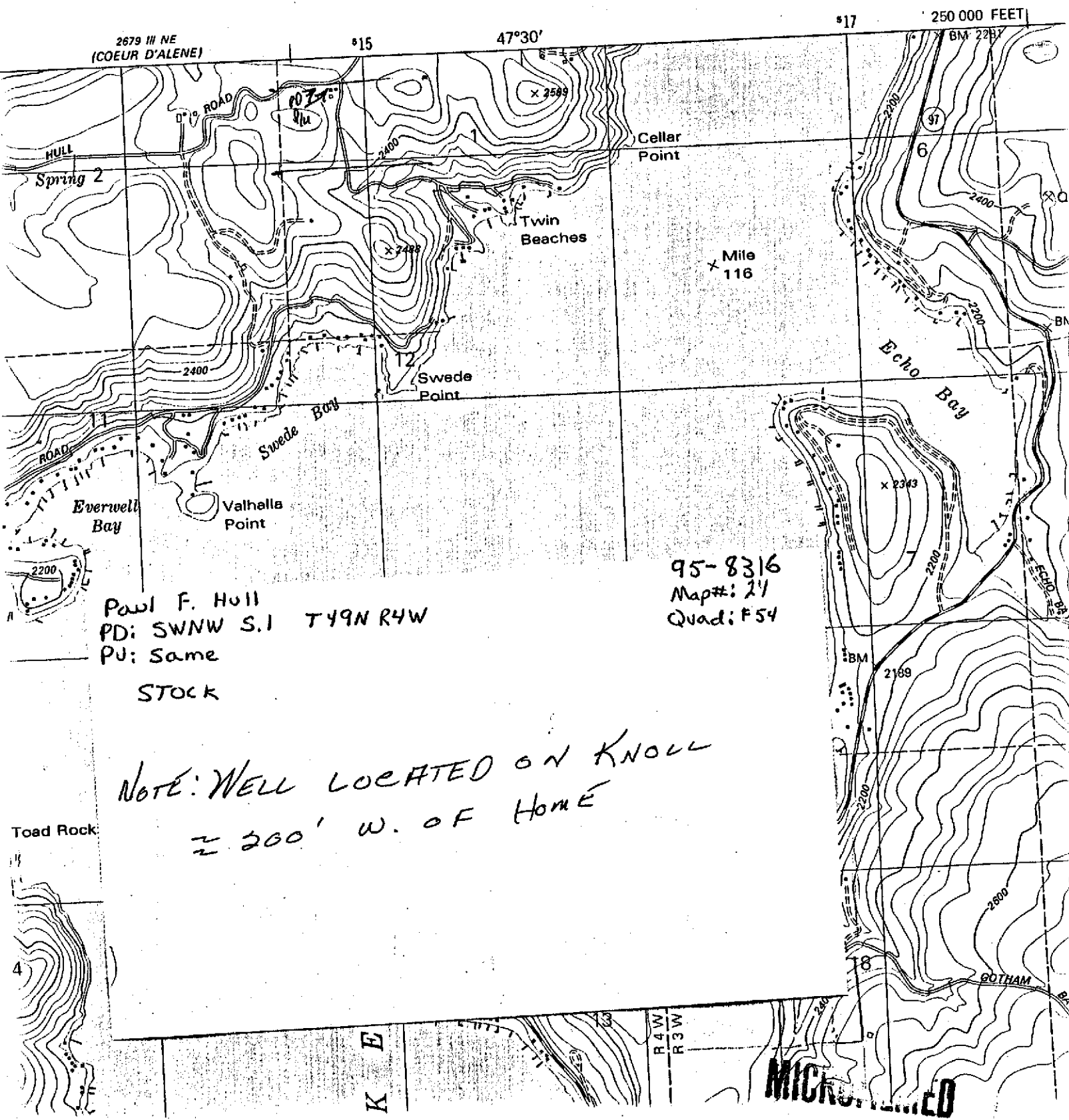
Inspected by

J King

Date

8/25/88

MICA BAY (IDAHO-KO)
7.5 MINUTE SERIES
SE/4 CREEK D'ALE



Paul F. Hull
PD: SWNW S.1 T49N R4W
PJ: Same
STOCK

95-8316
Map#: 21
Quad: F54

NOTE: WELL LOCATED ON KNOLL
≈ 200' W. OF HOME

MICA BAY

SEP 25 1989

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
COMMENCEMENT OF WORKS

Permit No. 95-8316

Name(s) of Permit Holder(s): Paul F. Hull

Post Office Address: Star Rt. Coeur d'Alene, Id.

Tel. No. 664-4435

☒ I hereby certify that construction of diversion works for the above referenced permit began on 5/18/83
(date)

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.

9/12/83

Date

Paul F. Hull
Signature of Permit Holder

PLACE
STAMP
HERE

Department of Water Resources
Northern District Office

SEP 18 1983

RECEIVED

MICROFILMED



SEP 25 1989

IDAHO DEPARTMENT OF WATER RESOURCES
STATEHOUSE
BOISE, IDAHO 83720



State of Idaho
DEPARTMENT OF WATER RESOURCES
NORTHERN REGION, Suite No. 9 • 4055 Government Way • Coeur d'Alene, Idaho 83814 • (208) 765-4639

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

August 11, 1988

Mr. Paul Hull
2805 Hull Rd.
Coeur d'Alene, Id. 83814

Re: 95-8316

Dear Mr. Hull:

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 at the time he makes the examination so that you may show him 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

SEP 25 1989



1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 95-8316

Date: 7-26-1988

General Considerations:

3 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:

Y Surface water
Y Groundwater
_____ 1. well log in file
N/A 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

JUN 3 1988

RECEIVED

JUN - 8 1988

For Office Use Only

Fee Received _____

Date _____

Receipt # _____

Receipt by _____

Reviewed by _____

Sent to region _____

Department of Water Resources
Northern District Office

STATE OF IDAHO Department of Water Resources

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. 95-8316 Paul F. Hull

Name(s) of Permit Holder: 2805 Hull Rd

Post Office Address: cd A ID 83814

Telephone No. 664-6436

Source of Water: Groundwater

Extent of Use:

Domestic 1 (number of households) Stockwater 15 cattle & Horses (number and type of stock)

Irrigation _____ (acres) Other/Remark _____

Total rate and/or volume for which proof is submitted 02 cfs _____ acre-feet

Show the date water was first diverted and beneficially used under this permit: 5-18-1983

Measuring Device: Required? Yes X No
Installed? Yes X No

Fee enclosed \$ NA
(See License Examination Fee Schedule)

Flow Measurement Port: Required? Yes X No
Installed? Yes X No

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

As Above

(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.

RECEIVED

AUG 18 1988

Date

Paul F. Hull
Signature of Permit Holder (and title, if appropriate)

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

USE TYPEWRITER OR
BALLPOINT PEN

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>Paul Hill</u> Address: <u>Star Route CDA, Idaho 83814</u> Owner's Permit No. _____	7. WATER LEVEL Static water level: <u>30</u> Depth of water to surface Flowing? ☐ Yes ☒ No Artesian closed in pressure ☐ Yes ☒ No Controlled by ☐ Valve ☐ Cap ☒ Plug Temperature: <u>cold</u> Quality: <u>good</u> Describe artesian or temperature zones below																																																																								
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge (GPM)</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td><u>3 GPM</u></td> <td></td> <td></td> </tr> </tbody> </table>	Discharge (GPM)	Pumping Level	Hours Pumped	<u>3 GPM</u>																																																																				
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection (specify type) ☐ Other	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th rowspan="2">Water Yes/No</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>6</td> <td>0</td> <td>32</td> <td>Decomposed granite</td> <td>X</td> </tr> <tr> <td>6</td> <td>32</td> <td>33</td> <td>soft seam</td> <td>X</td> </tr> <tr> <td>6</td> <td>33</td> <td>62</td> <td>decomposed granite</td> <td>X</td> </tr> <tr> <td>6</td> <td>62</td> <td>74</td> <td>fine green granite</td> <td>X</td> </tr> <tr> <td>6</td> <td>74</td> <td>76</td> <td>broken seam</td> <td>X</td> </tr> <tr> <td>6</td> <td>76</td> <td>84</td> <td>green granite</td> <td>X</td> </tr> <tr> <td>6</td> <td>84</td> <td>86</td> <td>broken seam</td> <td>X</td> </tr> <tr> <td>6</td> <td>86</td> <td>106</td> <td>black & white granite</td> <td>X</td> </tr> <tr> <td>6</td> <td>106</td> <td>119</td> <td>quartz seam</td> <td>X</td> </tr> <tr> <td>6</td> <td>119</td> <td>152</td> <td>black & white</td> <td>X</td> </tr> <tr> <td>6</td> <td>152</td> <td>156</td> <td>quartz seam</td> <td>X</td> </tr> <tr> <td>6</td> <td>156</td> <td>173</td> <td>black & white granite hard</td> <td>X</td> </tr> <tr> <td>6</td> <td>173</td> <td>280</td> <td>black granite</td> <td>X</td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water Yes/No	From	To	6	0	32	Decomposed granite	X	6	32	33	soft seam	X	6	33	62	decomposed granite	X	6	62	74	fine green granite	X	6	74	76	broken seam	X	6	76	84	green granite	X	6	84	86	broken seam	X	6	86	106	black & white granite	X	6	106	119	quartz seam	X	6	119	152	black & white	X	6	152	156	quartz seam	X	6	156	173	black & white granite hard	X	6	173	280	black granite	X
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Aug ☐ Other	10. WORK SCHEDULE Work started: <u>4/27/83</u> Finished: <u>4/30/83</u>																																																																								
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other Thickness: <u>250</u> inches Diameter: <u>6</u> inches From: <u>1</u> foot To: <u>20</u> 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 of perforations: _____ From _____ feet To _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name: _____ Type: _____ Model No. _____ Diameter: _____ Slot size: _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No Size of gravel: _____ Placed from _____ feet to _____ feet Surface seal depth: <u>18</u> Material used in seal: ☐ Cement grout ☐ Bentonite ☐ Pudding clay ☐ Shurry pit ☐ Temp. surface casing Sealing procedure used: ☐ Overbore to seal depth ☐ Welded ☐ Solvent ☐ Cemented between struts Method of joining casing: ☐ Threaded ☐ Welded ☐ Solvent Describe screen part: _____	11. DRILLER'S CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was run. Firm Name: <u>Murphy Drilling Co.</u> Firm No. <u>289</u> Address: <u>East 17280 Linko Road</u> <u>Greenwood, Mo. 64616</u> Signed by (Firm Official): <u>[Signature]</u> and (Operator): <u>[Signature]</u>																																																																								
6. LOCATION OF WELL Sketch map location must agree with written location. Subdivision Name: _____ Lot No. _____ Block No. _____ County: _____	12. ADDITIONAL COMMENTS _____																																																																								

138870
CERTIFIED MAIL
May 31, 1988

HULL, PAUL F.
STAR RT.
COEUR D ALENE, ID 83814

PROOF DUE NOTICE

RE: Permit No. 95-8316

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 August 1, 1988. (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 completed 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, or the permit will no longer be of any force nor effect.

Sincerely,

RITA FLECK
Secretary/Records Manager

Enclosures

RECORDED

AUG 18 1988

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

STATEHOUSE
BOISE, IDAHO 83720
(208) 334-4440

HULL, PAUL F.
STAR RT.
COEUR D'ALENE, ID 83814

AUGUST 02, 1983

RE: PERMIT NO. 95-8316

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.

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. ALSO ENCLOSED FOR YOUR CONVENIENCE IS THE STATEMENT OF BENEFICIAL USE POSTCARD THAT MUST BE SUBMITTED WHEN YOUR PROJECT IS COMPLETED.

SINCERELY,

DAVID R. TUTHILL, JR., P.E.
SUPERVISOR, WATER ALLOCATION SECTION

ENCLOSURE

MICROFILMED

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: JK

APPLICATION NUMBER: _____

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. Copies sent by: _____ Date: _____
☐ Idaho Fish and Game Department. _____
☐ Idaho Department of Lands. _____
☐ U.S. Bureau of Land Management. _____
☐ U.S. Forest Service. _____
☐ Other _____

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: 6/27/83 ✓
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 6/83 ✓
☒ 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? _____
✓ 5-26-83 Date of priority recommended.
Special conditions of approval or cover letter. _____

RECEIVED
JUL 15 1983

By: SLW/L16 Date: 7-12-83 Department of Water Resources

STATE OFFICE REVIEW:

- ☐ See attached sheet for more information.
By: T. [Signature] Date: 7/15/83

POINT OF DIVERSION AND STREAM INDEX INFORMATION

TRACT	SEC	TWP	RGE	gov't lot	rediv. (R)	REACH
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TRACT	SEC	TWP	RGE	gov't lot	rediv. (R)	REACH
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95-8316-

HULL, PAUL F.

STAR RT., COEUR D'ALENE, ID 83814

Source: GROUNDWATER

Date Filed: 05/26/1983

Diversion Pt: SWNW Sec 01 T 49N R 04W

Use: STOCKWATER	(0.01 CFS)
DOMESTIC	(0.02 CFS)

In: SWNW Sec 01 T 49N R 04W

FILED