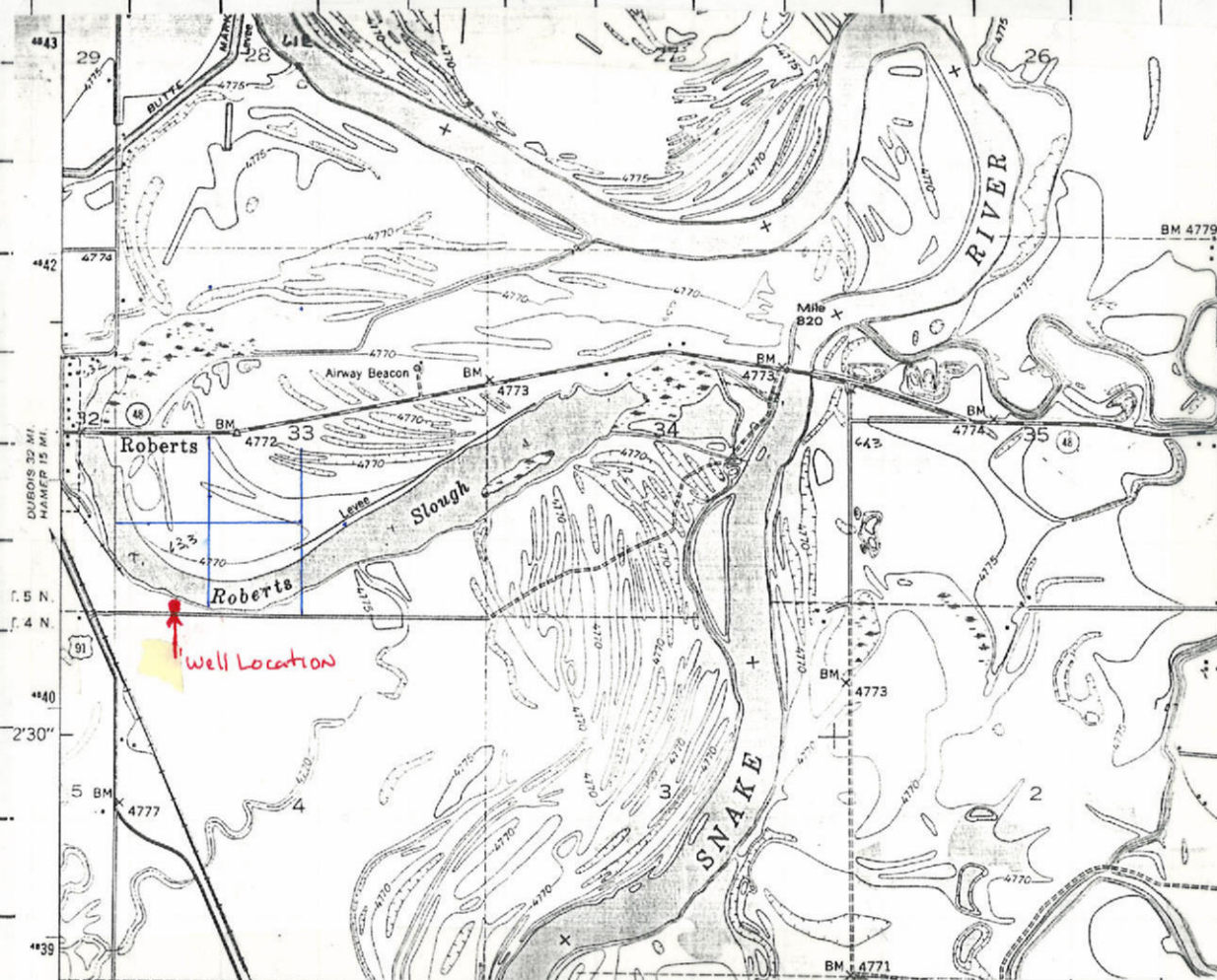


13. Map of proposed project: show clearly the proposed point of diversion, place of use, section number, township and range number.



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.

Loren R Lounsbury
(Applicant)
MAYOR

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

1. Owner: City of Roberts Permit No. 35-8712
Current Address: 19 West Park Ave Roberts Id 83444 Phone No. 228-3220
2. Accompanied by: Mark Tanner EXAM. DATE: 07/23/91
Address: Same Phone No. Same
Relationship to Permit Holder: city employee
3. Source: groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: NA ☐ Copies Attached
2. Other water rights with same point of diversion: NA ☐ Copies Attached ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

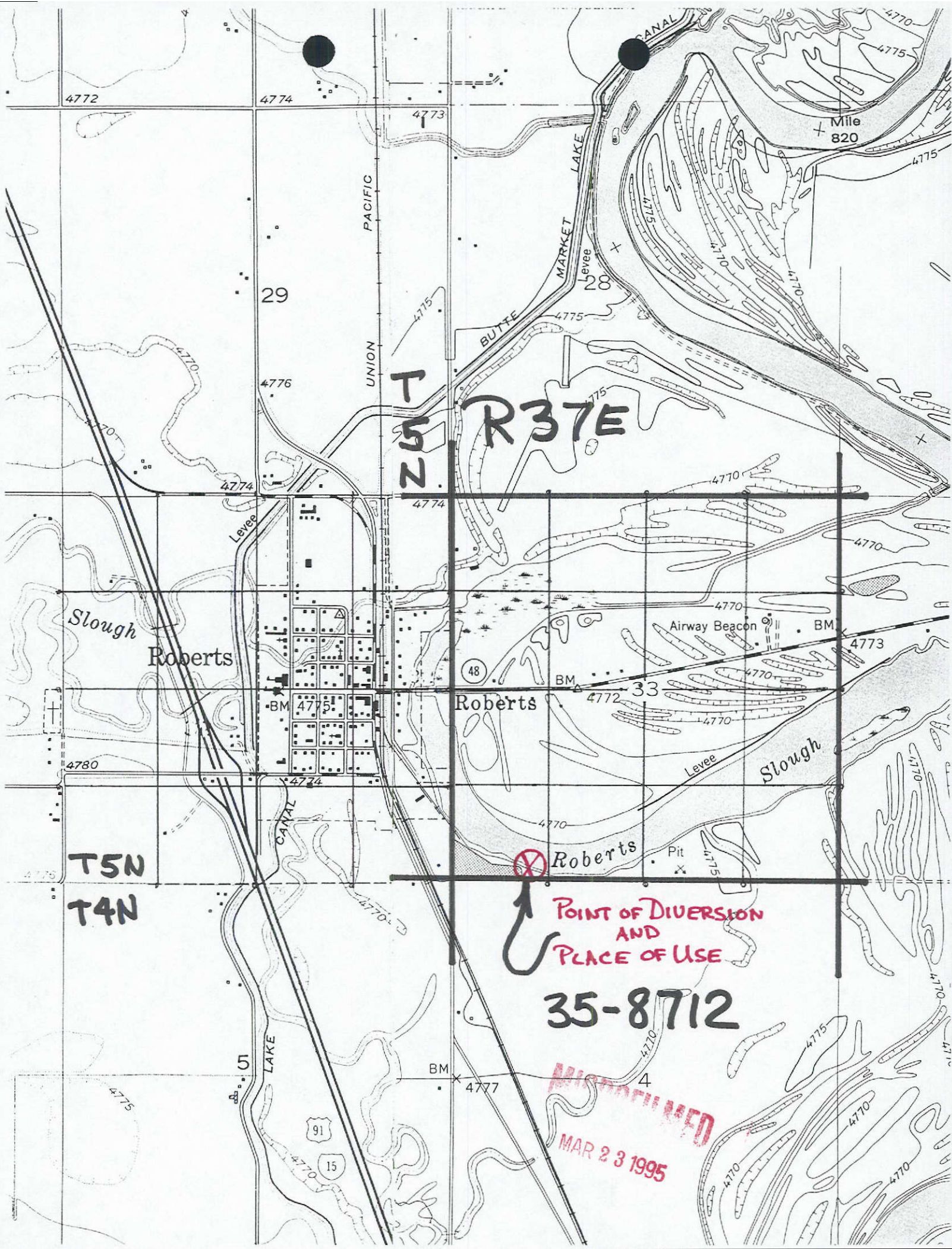
1. **Diversion System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe i.d. as applicable. ☐ Alternative diagram attached



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). ☒ 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).

MAR 23 1995



T5N

R37E

Slough

Roberts

Roberts

Roberts

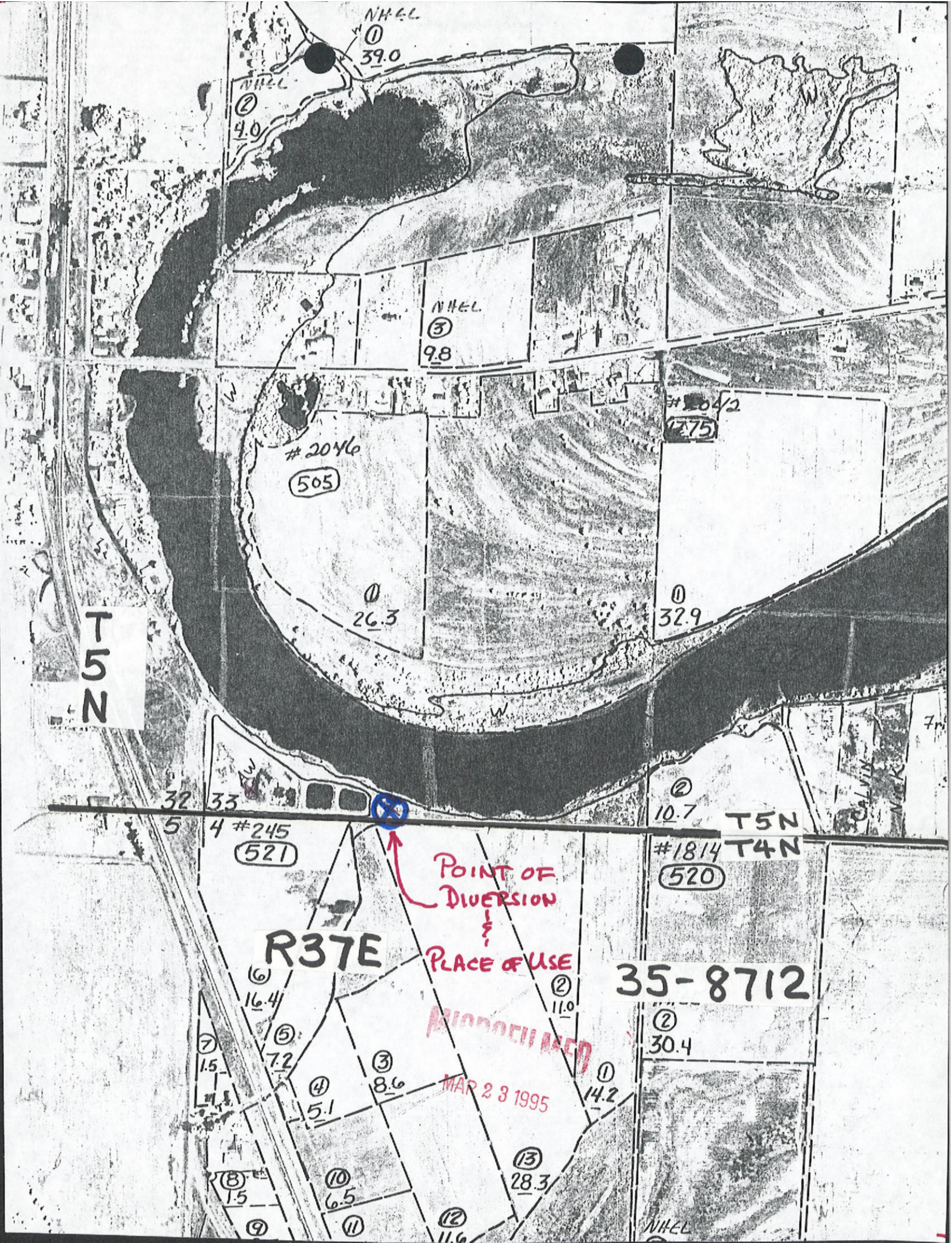
T5N

T4N

POINT OF DIVERSION
AND
PLACE OF USE

35-8712

MICROFILMED
MAR 23 1995



NH&L
①
39.0

NH&L
②
4.0

NH&L
③
9.8

#2046
(505)

①
26.3

#1814
(520)

①
32.9

T5N

32 33
5 4 #245
(521)

POINT OF
DIVERSION

PLACE OF USE

R37E

②
10.7
#1814
T5N
T4N
(520)

35-8712

RECORDED

MAR 23 1995

⑥
16.4
⑤
7.2
⑦
1.5
⑧
1.5
⑨

③
8.6
④
5.1
⑩
6.5
⑪

②
11.0
①
14.2
⑬
28.3
⑫
11.6

②
30.4

NH&L



35-8712

RECORDED

MAR 23 1995

35-8712

**FEDERAL
EXPRESS****QUESTIONS? CALL 800-238-5355 TOLL FREE.**AIRBILL
NUMBER**7000652805****7000652805**

Date

07/31/90

From (Your Name) Please Print

DUNN & CLARK

Company

DUNN & CLARK

Street Address

115 North Clark

City

Rigby

State

ID

Your Phone Number (Very Important)

(208) 745-9209

Department/Floor No.

To (Recipient's Name) Please Print

DEPT. OF WATER RES.

Company

DEPT. OF WATER RESOURCES

Recipient's Phone Number (Very Important)

(208) 327-7900

Department/Floor No.

Exact Street Address (Use of P.O. Boxes or P.O. Zip Codes Will Delay Delivery And Result in Extra Charge.)

1301 North Orchard Street

City

Boise

State

ID

ZIP Street Address Zip Required

83720**3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)****H HOLD FOR PICK-UP AT THIS FEDERAL EXPRESS LOCATION:**
Street Address (See Service Guide or Call 800-238-5355)

Federal Express Use

Base Charges

15.00

Declared Value Charge

Origin Agent Charge

City

State

ZIP Zip Code of Street Address Required

Emp. No.

Date

☐ Cash Received☐ Return Shipment☐ Third Party☐ Chg. To Del.☐ Chg. To Hold

Street Address

Other

City

State

Zip

Total Charges

15.00

Received By:

X

Date/Time Received FedEx Employee Number

PART #2041738900
REC-S-760-40/25
REVISION DATE 5/87
PRINTED U.S.A. SRCE**007****4 PAYMENT**☐ Bill Sender☐ Bill Recipient's FedEx Acct. No.☐ Bill 3rd Party FedEx Acct. No.☐ Bill Credit Card☒ Cash**SERVICES
CHECK ONLY ONE BOX****DELIVERY AND SPECIAL HANDLING
CHECK SERVICES REQUIRED**1 ☐ **PRIORITY 1** Overnight Delivery 6 ☒ **OVERNIGHT LETTER*** (Our Packaging) 9A-12N**OVERNIGHT DELIVERY
USING OUR PACKAGING**2 ☐ Courier-Pak Overnight Envelope* 12"x 15 1/2"3 ☐ Overnight Box 12 1/2"x 17 1/2"x 3" A ☐4 ☐ Overnight Tube 38"x 6"x 6"x 6" B ☐

*Declared Value Limit \$100.

5 ☐ **STANDARD AIR**

Delivery not later than

second business day

SERVICE COMMITMENT

PRIORITY 1 - Delivery is scheduled early next business morning in most locations. It may take two or more business days if the destination is outside our primary service areas.

STANDARD AIR - Delivery is generally next business day or not later than second business day. It may take three or more business days if the destination is outside our primary service areas.

1 ☐ **HOLD FOR PICK-UP** (Fill in Section H at right)2 ☒ **DELIVER WEEKDAY**3 ☐ **DELIVER SATURDAY** (Extra charge)4 ☐ **DAANGEROUS GOODS** (P-1 and Standard Air Packages only. Extra charge)5 ☐ **CONSTANT SURVEILLANCE SERVICE (CSS)** (Extra charge) (Do Not Complete Section 5)6 ☐ **DRY ICE** Lbs.7 ☐ **OTHER SPECIAL SERVICE**8 ☐9 ☐ **SATURDAY PICK-UP** (Extra charge)10 ☐**JAN 04 1991**

Total Total Total

Received At

1 ☐ Regular Stop2 ☐ On Call Stop3 ☐ Drop Box4 ☐ B.S.C.5 ☐ Station

Federal Express Corp. Employee No.

Date/Time For Federal Express Use

7 31 1405

Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release

Signature:

RECIPIENT'S COPY

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 35-08712

Priority: March 10, 1989

Maximum Diversion Rate:

0.08 CFS

Maximum Diversion Volume:

19.3 AF

This is to certify, that CITY OF ROBERTS

PO BOX 242

ROBERTS ID 83444

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated March 10, 1989; and has submitted Proof of Beneficial Use on August 1, 1990. An examination indicates that the works have a diversion capacity of 0.080 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>
WATER QUAL. IMPROVEMENT	01/01 to 12/31	0.08 CFS	19.3 AF

LOCATION OF POINT(S) OF DIVERSION:

SWSW , Sec. 33, Township 05N, Range 37E
JEFFERSON County

PLACE OF USE: WATER QUAL. IMPROVEMENT

TWN RGE SEC

05N 37E 33

SWSW

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. Water used under this right if discharged into a natural channel or subsurface system shall meet Idaho Water Quality Standards.
6. Water quality improvement use is for a wastewater treatment plant.

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 23RD day of FEBRUARY, 1995.

MAR 23 1995

Acting

R. Keith Higginson, Director

State of Idaho
Department of Water Resources

APPLICATION FOR AMENDMENT
(For Licensing Purposes)
WATER RIGHT NO. 35-08712

RECEIVED

FEB 16 1995

APPROVED
Department of Water Resources

Date of Priority: March 10, 1989

Maximum Diversion Rate: 0.08 CFS

Maximum Diversion Volume: 19.3 AF

Comes now
PO BOX 242
ROBERTS ID 83444

CITY OF ROBERTS

and represents to the Director of the

Idaho Department of Water Resources:

That he is the owner and holder of Permit to Appropriate the Public Waters of the State of Idaho No. 35-08712, and requests that the permit be changed as follows:

Source: GROUNDWATER

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
WATER QUAL. IMPROVEMENT	01/01 to 12/31	0.08 CFS	19.3 AF

LOCATION OF POINT(S) OF DIVERSION:

SWSW , Sec. 33, Township 05N, Range 37E
JEFFERSON County

PLACE OF USE: WATER QUAL. IMPROVEMENT

TWN RGE SEC

05N 37E 33 SWSW

APPROVED

MAR 23 1995

Permit holder asserts that no one will be injured by such change and that such change will be made at permit holder's own risk.

Signed at City of Roberts, this 12th day of February, 1995.

Carmen Odellmeyer
(Signature) clerk

State of Idaho
Department of Water Resources

APPLICATION FOR AMENDMENT
(For Licensing Purposes)
WATER RIGHT NO. 35-08712

FOR DEPARTMENT USE ONLY

Preliminary check by _____ Fee = 500.00 Received by JW # 032167 Date 2-16-95

ACTION OF THE DEPARTMENT OF WATER RESOURCES

I, R. Keith Higginson, of the Department of Water Resources hereby approve the above Application for Amendment for Permit No. 35-08712 with the following;

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. Water used under this right if discharged into a natural channel or subsurface system shall meet Idaho Water Quality Standards.
6. Water quality improvement use is for a wastewater treatment plant.

Witness my hand this 23RD day of FEBRUARY, 1995.

Acting for

R. Keith Higginson, Director

MICROFILMED
MAR 23 1995

\$ 50.00

RECEIVED
AUG 1 1990

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

Department of Water Resources

The Idaho Department of Water Resources will consider this form as a statement that the permit holder(s) has/have 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. P35-08712 Telephone No. 228-3220

Name(s) of Permit Holder(s): City of Roberts

Post Office Address: P. O. Box 242, Roberts, ID 83444

Source of Water: Groundwater

If ground water, well driller's name: Please see attachment. Date drilled: Please see attachment.

Extent of Use:
Domestic 188 (No. of households) Irrigation _____ (No. of acres)
Stockwater _____ (No. and type of stock) Other Businesses - 25

Total rate and/or volume for which proof is submitted 1.5 cfs _____ acre/feet

Show date water was first diverted and beneficially used under this permit: Please see attachment.

One of the following may be a condition of approval of your permit:

Measuring device: Required? Yes XNo Installed? Yes XNo

OR

Flow Measurement Port: Required? XYes No Installed? XYes No

Fee Enclosed: \$ 125.00 (See License Examination Fee Schedule)

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

Mark Tanner 228-3220
Name Telephone No.

P. O. Box 242, Roberts, ID 83444
Address

MICROFILMED

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.

JAN 04 1991

7/31/90
Date

[Signature]
Signature (and title if on behalf of a company or organization)
city attorney

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

Ident. No. _____

To appropriate the public waters of the State of Idaho

APPROVED
JAN 1 1989
Department of Water Resources
Eastern District Office

1. Name of applicant CITY OF ROBERTS Phone 228-3220
Post office address 19 West Park Aveune; Roberts, Idaho 83444

2. Source of water supply Well which is a tributary of N/A

3. Location of point of diversion is SE SW* 1/4 of SE* 1/4 of SW 1/4, Govt. Lot _____
Sec. 33 Township 5 N Range 37 E B.M. Jefferson County; additional
points of diversion if any: _____

* CHANGES AS PER TELECON 10 APRIL 1989 - KCW

4. Water will be used for the following purposes:

Amount 0.2 cfs for municipal 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)

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

5. Total quantity to be appropriated is (a) 0.2 cfs and/or (b) _____
cubic feet per second acre feet per annum

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. 6-inch diameter well with submersible
pump. Pump into pneumatic water tanks inside wastewater disinfection building

b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet; total
reservoir capacity _____ acre-feet; period of year when water will be diverted to storage:
_____ to _____ inclusive.

c. Proposed well diameter is 6 inches; proposed depth of well is 40 feet.

d. Is ground water with a temperature of greater than 90°F being sought? No

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

AUG 18 1989

8. Description of proposed uses (if irrigation only, go to item 9):

- a. Hydropower; show total feet of head and proposed capacity in KW. _____
- b. Stockwatering; list number and kind of livestock. _____
- c. Municipal; show name of municipality. CITY OF ROBERTS
- d. Domestic; show number of households. _____
- e. Other; describe fully. _____

9. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RANGE	SEC.	NE¼				NW¼				SW¼				SE¼				TOTALS
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
5N	37E	33											M	M*					

* CHANGES AS PER TELECON 10 APRIL 1989 - KCW

Total number of acres to be irrigated _____

10. Describe any other water rights used for the same purposes as described above. None

11. a. Who owns the property at the point of diversion? CITY OF ROBERTS

b. Who owns the land to be irrigated or place of use? CITY OF ROBERTS

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

12. Remarks: Water source is to be used to help operate and maintain the chlorination and wastewater facilities building.

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AUG 18 1989

Topographic map of the Snake River area, showing the Snake River, Roberts Slough, and various landmarks. The map includes a grid with coordinates 29, 28, 26, 24, 23, 22, 21, 20, 19, 18, 17, 16, 15, 14, 13, 12, 11, 10, 9, 8, 7, 6, 5, 4, 3, 2, 1, 0. The map shows the Snake River flowing from the top right towards the bottom center. Roberts Slough is a large body of water in the center. The map includes various landmarks such as Roberts, Airway Beacon, and Well Location. The map is overlaid with a grid with coordinates 29, 28, 26, 24, 23, 22, 21, 20, 19, 18, 17, 16, 15, 14, 13, 12, 11, 10, 9, 8, 7, 6, 5, 4, 3, 2, 1, 0. The map is labeled with 'MICROFILMED' and 'AUG 18 1989'.

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.

Loren R Lounsbury
(Applicant)
MAYOR

Proposed Priority 3/10/89

Received by RB Date 3-10-89 Time 8:50 Preliminary check by KW

Fee \$ ~~445.00~~ 30. Receipted by SM. # E006174 Date 3-16-1989
5-3:5-10-89

Publication prepared by RB Date 4-21-89 Published in Jefferson Star

Publication approved CW Date 5-16-89

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. 35-8712, 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 90.

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. The water right acquired under this permit if for hydropower purposes shall be junior and subordinate to all rights to the use of water, other than hydropower, within the State of Idaho that are initiated later in time than the priority of this permit and shall not give rise to any right or claim against any future rights to the use of water, other than hydropower, within the State of Idaho initiated later in time than the priority of this permit.

e. Other: Permit holder shall comply with the drilling permit requirements of Section 42-235, Idaho Code.

Water used under this permit if discharged into a natural channel or subsurface system shall meet Idaho Water Quality Standards.

Witness my hand this 10th day of July, 1989.

A. Glen Saylor

MICROFILMED

AUG 18 1989



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

PHILIP E. BATT
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

February 24, 1995

CITY OF ROBERTS
PO BOX 242
ROBERTS ID 83444

RE: WATER RIGHT NO. 35-08712

Dear Water Right Holder(s):

Enclosed is a copy of the Water Right License issued on the above referenced permit along with a copy of your approved Application for Amendment.

Should you have any questions regarding these documents, please contact me.

Sincerely,

A handwritten signature in cursive script that reads "Shelley W. Keen".

Shelley W. Keen
Water Rights Supervisor

SK:rl

Enclosure

RECORDED

MAR 23 1995



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

January 31, 1995

PHILIP E. BATT
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

CITY OF ROBERTS
PO BOX 242
ROBERTS ID 83444

RE: PERMIT NO. 35-08712

Dear Water Right Holder(s):

The above referenced permit is in the process of being reviewed for licensing. However, before a license can be issued, your permit must be amended to correspond with the findings of the Department's field examiner.

The enclosed Application for Amendment contains information that will be included on the license when it is issued. The amendment reflects a change in the nature of use. Because the water used under this permit is actually for a wastewater treatment facility, the use "water quality improvement" is a more accurate description than the municipal designation. Please review carefully and if you concur, sign the amendment and return with the \$50.00 filing fee within 14 days.

The last page of the Application for Amendment form contains a list of CONDITIONS/REMARKS proposed for the license when it is issued. These conditions/remarks may be modified upon further administrative review.

Thank you for your assistance and if you have any questions with this information, please contact me as soon as possible. My telephone number is (208) 327-7946.

Sincerely,

SHELLEY W. KEEN
Water Rights Supervisor

SWK:bc

Enclosure

RECEIVED
MAR 23 1995

LICENSE REVIEW CHECKLIST



PERMIT NO. 35-8712 DATE 1-27-95

NAME	Yes <u> </u> No <u>✓</u>	Or Address Change?
PRIORITY DATE	<u> </u> <u>✓</u>	Advance? <u> </u> Advanced to: <u> </u> Order to reinstate needed? <u> </u> Incorrect fee for rate recommended? <u>NO</u>
SOURCE	<u> </u> <u>✓</u>	Changes or just clarification of originally intended source? <u> </u> Notice of Intent to Void necessary? <u> </u>
POINT OF DIV	<u> </u> <u>✓</u>	Amendment needed? <u>Change to SWSW 1/4 of S33.</u> Overlaps? <u>In correct</u>
PLACE OF USE	<u> </u> <u>✓</u>	Amendment needed? <u> </u> Overlaps? <u> </u>
DIV RATE	<u> </u> <u>✓</u>	Permit/fee limits: <u>.20 CFS</u> Meas Q = <u> </u> Theo Q = <u>.08</u> Recommend: <u>.08 CFS</u> <u>8.8 X .7 X 1.5 HP</u> <u>20' + (2.31 X 40 PSI) = .08 CFS (at 15' w .09 CFS)</u> Combined rates exceed capacity <u> </u>
ANNUAL VOLUME	<u> </u> <u>✓</u>	Volume Limit: <u> </u> Season: <u> </u> Calculations: <u>8 hrs per day / 24 = 1/3 X 57.9 = 19.3 cfs</u> Flow limit: <u>.08</u> cfs x <u>365</u> x <u>1.9835</u> = <u>57.9</u> Combined volumes exceed capacity/allowable <u> </u>
USES	<u> </u> <u>✓</u>	Change in Nature of Use or additional uses? <u>to</u> Amendment necessary? <u>(YES) WATER QUALITY IMPROVEMENT</u> <u>JUST A CLARIFICATION</u>
REMARKS	<u> </u> <u>✓</u>	Multiple p/d(s) in 1/4 1/4? <u> </u> <u>OF THE USE.</u> Other <u> </u>
CONDITIONS	<u> </u> <u>✓</u>	Measuring/Locking Devices <u> </u> Watermaster control - District <u> </u> Irrigation Overlap <u> </u> <u>09E</u> Water Quality <u> </u> Other <u> </u> Heat/Cool/ Fish verified <u> </u>

COMMENTS: possibly Use should have been for Water Purification & Water Quality Improvement

(YES) Reduce rate to capacity. Amend:

RECOMMENDED	CFS	VOL	SRBA Claim Filed	Nature of Use
<u>Municipal</u>	<u>.08</u>	<u>19.3</u>	Adjustment Memo Needed	<u>NO</u>
<u>Water Quality Improvement</u>	<u> </u>	<u> </u>		<u>YES</u>
	<u> </u>	<u> </u>	LICENSE	
	<u> </u>	<u> </u>	1ST AMENDMENT LETTER	<u>SPECIAL</u>
	<u> </u>	<u> </u>	FINAL AMENDMENT LETTER	<u>P47</u>

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Staff Analysis Sheet
for
Beneficial Use Field Report

35-8712
Permit No.

RECEIVED

NOV 01 1994

Department of Water Resources

A. Prior to Conducting the Exam, the File Contains:

- ☒ Blank Field Report Form
- ☒ Copy of Permit
- ☒ Copies of any Amendments/Orders with conditions of approval
- ☐ Computer Data Proof Report
- ☒ Copy of U.S.G.S. Quad
- ☒ Check for Government Lots. If so, make a copy of Government Plat

Check of P/O index AWP 07/23/91 (Initial and date)

Overlap? ☐ yes ☒ no If yes: ☐ copy of exam(s) attached?

Type of Overlap? ☐ Add acres or uses to existing system

☐ Increase rate of flow or volume

☐ Other: _____

Check of P/U index AWP 07/23/91 (Initial and date)

Overlap? ☐ yes ☒ no If yes: ☐ copy of water right(s) attached?

Type of Overlap? ☐ Increase rate of flow or volume

☐ Add P/O's

☐ Increase number of acres within tracts

☐ Other: _____

Aerial Photo

Required? ☒ yes ☐ no If yes: ☒ copy attached?

Scheduling Letter sent? _____ (Initial and date)

☐ Appointment made and telephone conversation memo attached

B. After Conducting the Exam, the File Contains:

- ☐ Fully completed and signed Field Report Form
- ☐ Photographs of Point of Diversion and Place of Use
- ☐ Corrected Computer Data Proof Report with recommended license information, and date and signature of examiner.

C. Review and Processing:

Exam Completed AP 7-23-91 (Signature of examiner and date)

Exam Reviewed by Senior Water Resource Agent KCW 10/28/94 (Initial and date)

Exam Reviewed by Manager of Regional Office _____ (Initial and date)

Exam Date Entered in Computer 10/31/94 LH (Initial and date)

Exam sent to State Office 10/31/94 LH (Initial and date)

Copy of Staff Analysis Sheet sent to Manager of Regional Office and Original
Refiled in White File _____ (Initial and date)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No. 33-8712
1. Owner: City of Roberts Phone No. 228-3220
Current Address: 19 West Park Ave Roberts Id 83444
2. Accompanied by: Mark Tanner EXAM. DATE: 07/23/91
Address: Same Phone No. Same
Relationship to Permit Holder: city employee
3. Source: groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: NA

☐ Copies Attached
2. Other water rights with same point of diversion: NA

☐ 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).

MAR 23 1995

System Description (continued)

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

well, pump, 2 storage tanks, chlorinator & disinfecting system

pump make unknown

☐ 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
		1 1/2	—	—	2" discharge

*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
				SWSW	33	5N	37E	Jefferson	USGS QUAD and onsite inspection

6. Place(s) of Use:

Indicate Method of Determination

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	
5N	37E	33										M							

MAR 23 1998

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date
well probe	Olympic	Actat	500		500'	

2. Measurements:

operating pressure - 30-40 psig (installed gage)
static water level - 9' 1"

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:

2. Alternate Method for Checking Purposes:

$Q = \frac{hp (8.814) (eff)}{Lift + (PSI \times 2.308)} = 0.135 cfs$ $Q = \frac{hp - 1.5}{Lift + 9.08'} = 0.135 cfs$

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:

* See attached explanation memo for adjustment made. JB

MICROFILMED
MAR 23 1995

H. REMARKS AND OVERLAP REVIEW ANALYSIS

System is for chlorination system

*

NOTE: P/D should have been changed to SW SW Sec 33 T6N R37E
I believe that this was a mistake made by the department
and should not require an amendment by the applicants

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
* Municipal	1/1	12/31	0.14	
Totals:			0.14	

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

ALAN W. LARIS

Signature

Alan W. Laris

Certification Date

Field Report Preparation Date

CONSULTANT SEAL

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

* See attached adjustment memo BC

RECEIVED

MAR 23 1995

MEMORANDUM

TO: File 35-08712 / City of Roberts
FROM: Brenda Chapman
DATE: January 27, 1995
RE: Recommendation Adjustment(s)

=====

The final licensing recommendations for the above referenced water right are based on the information below:

E. FLOW CALCULATIONS

The theoretical calculation has been adjusted based on the standard .7 efficiency used and a pumping level of 20' (rather than the static water level). The attached well log shows a static water level of 8'6" and a depth of 106'.

$$\frac{8.8 \times .7 \times 1.5 \text{ hp}}{20' + (2.31 \times 40 \text{ psi})} = .08 \text{ cfs}$$

H. REMARKS

The water under this permit is used for the chlorination of wastewater for the city of Roberts. In checking the database for Water Quality Improvement licenses issued, a number were for wastewater chlorination for various cities. Therefore, the recommendation to change the nature of use from municipal to water quality improvement is being made. This change allows a volume limitation to be calculated and a place of use to be listed.

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use	Rate of Div	Annual Vol
Water Quality Improvement	1-01 to 12-31	.08	19.3

See items E & H.

RECEIVED
MAR 23 1995

2. Recommended Amendments

☒ Change P.D.	☐ Add P.D.	☐ None
☐ Change P.U.	☐ Add P.U.	☐ Other

The change in the point of diversion from the SESW $\frac{1}{4}$ to the SWSW $\frac{1}{4}$ of Section 33 will require an amendment. The permit was approved with the p/d being located in the SESW $\frac{1}{4}$ and the permit owner did not indicate to us that the permit was incorrect after it was issued.

Examiner: Alan Paris

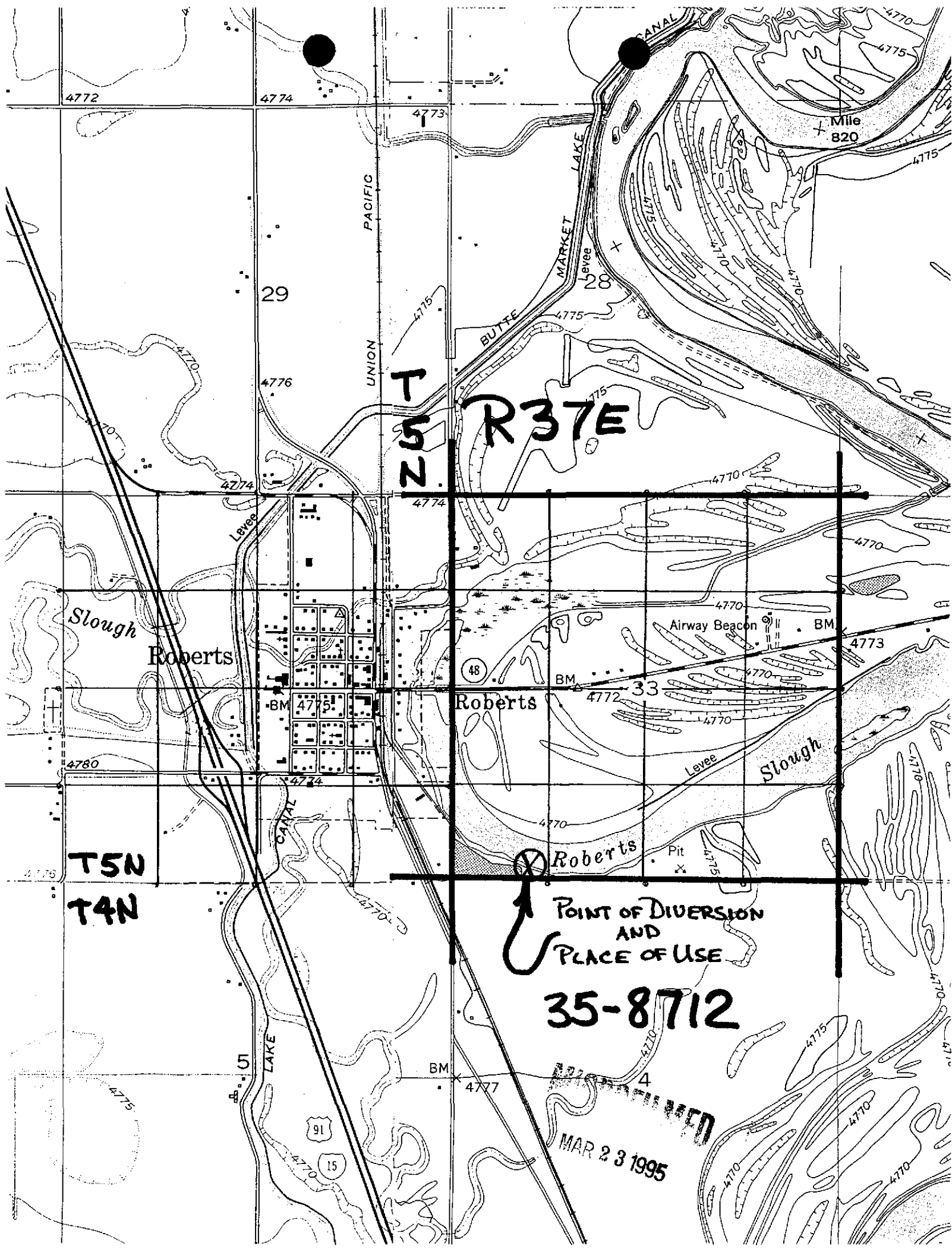
Exam date: 4/23/91

APPROVED
MED
APR 23 1995

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>City of Roberts</u> Address <u>Roberts, Idaho 83444</u> <u>Drillers Permit # 3508712</u> Owner's Permit No. <u>35-89-Z-002</u>		7. WATER LEVEL Static water level <u>8'6"</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 _____ of, Quality <u>Good</u> <i>Describe artesian or temperature zones below.</i>																																																					
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"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td> </td><td> </td><td> </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																																																	
Discharge G.P.M.	Pumping Level	Hours Pumped																																																					
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		9. LITHOLOGIC LOG <table border="1"><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>8</td><td>0</td><td>5</td><td>Soil</td><td></td><td>☒</td></tr><tr><td></td><td>5</td><td>40</td><td>Black sand</td><td></td><td>☒</td></tr><tr><td></td><td>40</td><td>71</td><td>Fine gray sand</td><td></td><td>☒</td></tr><tr><td></td><td>71</td><td>74</td><td>Black sand & pea gravel</td><td>☒</td><td></td></tr><tr><td></td><td>74</td><td>92</td><td>Blue gummy clay</td><td></td><td>☒</td></tr><tr><td></td><td>92</td><td>100</td><td>Broke black basalt</td><td>☒</td><td></td></tr><tr><td></td><td>100</td><td>106</td><td>Cinders</td><td>☒</td><td></td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	8	0	5	Soil		☒		5	40	Black sand		☒		40	71	Fine gray sand		☒		71	74	Black sand & pea gravel	☒			74	92	Blue gummy clay		☒		92	100	Broke black basalt	☒			100	106	Cinders	☒	
Bore Diam.	Depth		Material		Water																																																		
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	92	100	Broke black basalt	☒																																																			
	100	106	Cinders	☒																																																			
4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		RECEIVED MAR 16 1990 Department of Water Resources Eastern District Office RECEIVED APR 01 1991 Department of Water Resources																																																					
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><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>8</u> inches</td><td><u>1</u> feet</td><td><u>94</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"><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>30+</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>Well Cap</u>				Thickness	Diameter	From	To	<u>.250</u> inches	<u>8</u> inches	<u>1</u> feet	<u>94</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																				
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6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location. <table border="1"><tr><td>N</td><td></td><td></td></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td></tr></table> Subdivision Name <u> </u> Lot No. _____ Block No. _____ County <u>Jefferson</u> SW <u> </u> % SW <u> </u> % Sec. <u>33</u> T. <u>5</u> N. <u>37</u> E. <u> </u>		N			W		E													S			10. Work started <u>7/7/89</u> finished <u>7/14/89</u>																																
N																																																							
W		E																																																					
S																																																							
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>Andrew Well Drilling</u> Firm No. <u>5</u> Address <u>1268 E. 17th Street</u> Date <u>7/19/89</u> <u>Idaho Falls, Idaho 83404</u> Signed by (Firm Official) <u>Howard F. Andrews</u> and (Operator) <u>Dale Hulze</u>																																																							

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



T5N
Z61

R37E

Slough

Roberts

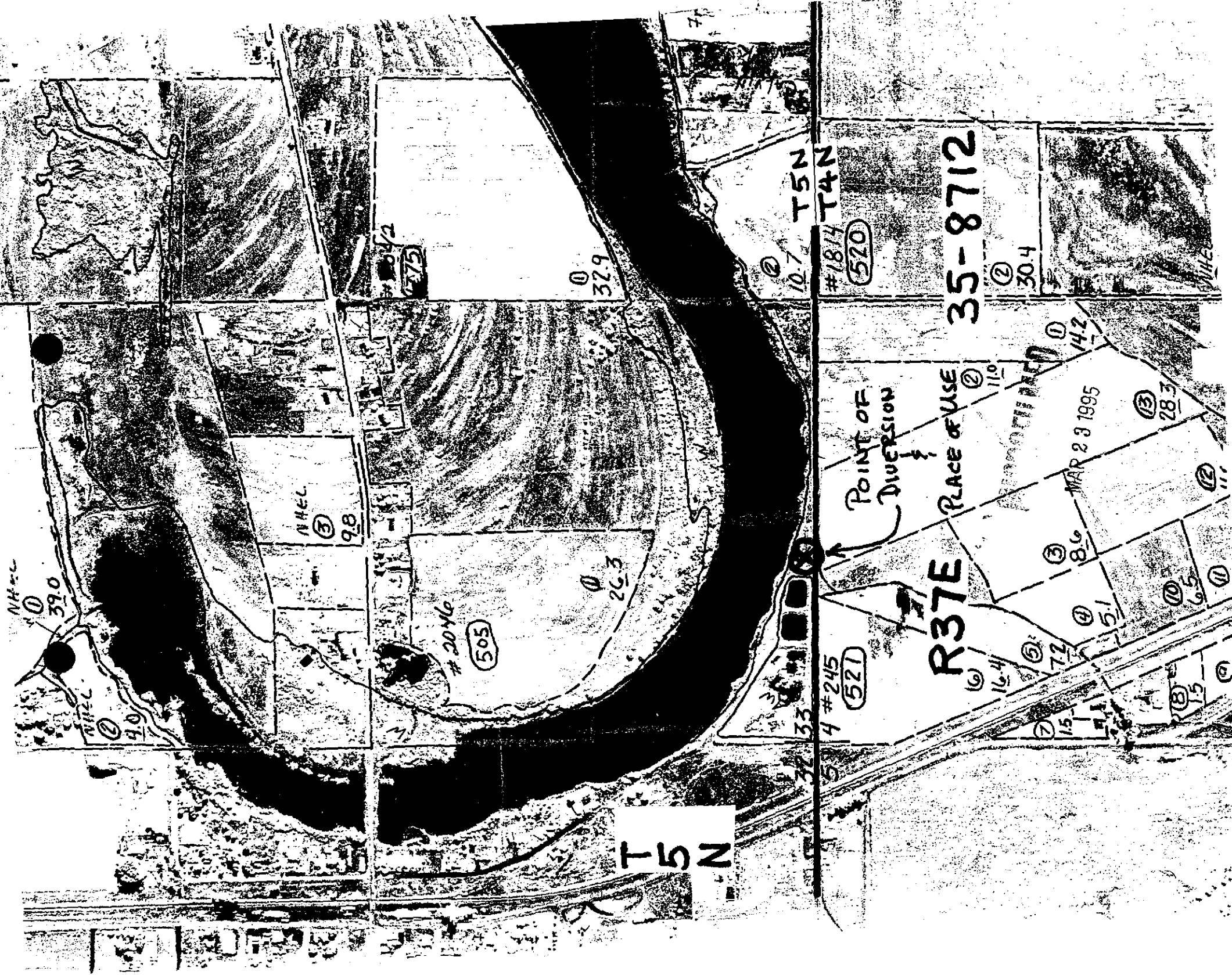
Roberts

Roberts

POINT OF DIVERSION
AND
PLACE OF USE

35-8712

MAR 23 1995



Department of Water Resources

WELL INSPECTION FORM

If well is associated with water right, provide WR# 35-8712

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

1. Legal Description: TWP 5N, Rge 37E, Sec. 33, SW 1/4 SW 1/4 or Lot _____.

2. Owner: City of Roberts
Address 19 West Park Ave, City Roberts, St Id

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

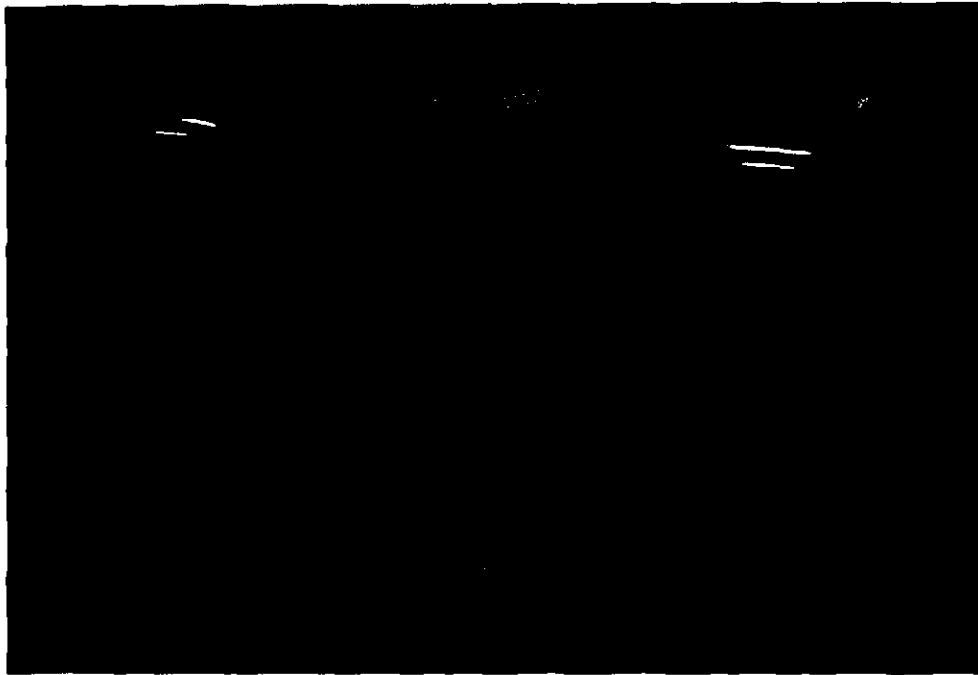
4. Access Port: Yes ☒ No _____ Static Water Level: 9' 1"
Pressure Gauge: Yes ☒ No _____ Casing Diameter: 10"
Flowing: Yes _____ No ☒ Temperature: N/A

5. Are there any obvious construction problems that may be a source for contamination or waste of water: Yes _____ No ☒

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

Remarks: _____

RECEIVED
MAR 23 1995



35-8712

RECORDED

MAR 23 1995

35-8712

WHITE — State Auditor
YELLOW — Remittance Advice
PINK — State Auditor then Agency
GOLDENROD — Agency Copy

EXPENDITURE VOUCHER

STATE OF IDAHO
Office of State Auditor

AGENCY USE

3700
Date 12/19/90
Code 193002

VENDOR: If you require additional information regarding this payment, please contact the State agency listed below.

AGENCY NAME: DEPT. OF WATER RESOURCES

Document No.	
Pre-Audit	Date
Warrant No.	

PAY
TO

CITY OF ROBERTS
PO BOX 242
ROBERTS, ID 83444

CHECK ONE:

(1) MISCELLANEOUS EXPENDITURE
() STATE CONTRACT

() PURCHASE ORDER

() MISCELLANEOUS
ENCUMBRANCE REQUISITION

- PAYMENT: () PARTIAL () FINAL

Encumbrance Reference No.

LINE No.	PROGRAM	FUND	ACCT.		DESCRIPTION	LINE AMOUNT	AGENCY USE
			Maj	Min			
1	05 30 122	123B	8831		REFUNDS PER RITA FLECK WR #35-8712 12/18/90 75.00	75.00	
TOTAL						75.00	

NOTE: Final payment must be accompanied by a receiving copy

TO STATE AUDITOR

Request is hereby made that a warrant be authorized and drawn in payment of the item or items described above. I hereby certify that the items described were ordered by proper authority; that they are necessary in the public service, that the items have been received and accounted for, and that the account as stated is correct and just.

AUDITOR'S CERTIFICATE

I hereby certify that the above account is in proper form; that totals carried hereon are correct; that receipts when required by law or regulation of the State Board of Examiners covering items for which reimbursement is asked are submitted herewith; and that there are funds in the state treasury and balances in appropriation accounts out of which the same may be lawfully paid.

Date

Head of Agency or Institution

State Auditor

December 18, 1990

City of Roberts
P. O. Box 242
Roberts, ID 83444

Gentlemen:

Re: Permit No. 35-8712

The department received the proof of beneficial use form and a fee of \$125. The license exam fee for 0.20 cfs is \$50. A refund of \$75 will be sent to you in several weeks.

The next step is for the department to conduct the field inspection to confirm and determine the extent of beneficial use. I cannot tell just when the representative from our Eastern Regional office will conduct the exam, but he will try to contact you or your representative prior to being in the area.

If you have questions, please contact me.

Sincerely,

RITA I. FLECK
Secretary/Records Manager

c: E. Region
Fiscal Section

MICROFILMED

JAN 04 1991

MEMORANDUM

DATE: December 18, 1990

TO: FISCAL SECTION

FROM: Nina Shields or Rita Fleck

RE: REFUND - 35-8712

Please prepare a refund of \$75.00 (receipt No. C0178¹⁷³~~E~~). Attached is a copy of the letter which explains why the refund is necessary.

Also, please reference the identification number on any papers returned to me for the file. Thanks.

Attachments: letter
receipt

MICROFILMED

JAN 24 1991

GROUNDWATER

Well #1: Drilled prior to 1919. Driller unknown.

Well #2: Drilled January, 1971. Driller: Cope Well Drilling.

Well #3: Drilled March, 1980. Driller: Rocky Mountain Well Drilling.

Date water was first diverted and beneficially used under this permit: Water from each well was diverted and used after each well was drilled.

MICROFILMED

JAN 04 1991

AIRBILL
NUMBER

7000652805

EXPRESS

7000652805

Date
07/31/90

From (Your Name) Please Print

DUNN & CLARK

Your Phone Number (Very Important)

(208) 745-9209

To (Recipient's Name) Please Print

DEPT. OF WATER RES.

Recipient's Phone Number (Very Important)

(208) 327-7900

Company

DUNN & CLARK

Department/Floor No.

Company

DEPT. OF WATER RESOURCES

Department/Floor No.

Street Address

115 North Clark

Exact Street Address (Use of P.O. Boxes or P.O. Zip Codes Will Delay Delivery And Result in Extra Charge.)

1301 North Orchard Street

City

Rigby

State

ID

ZIP Required For Correct Invoicing

83442

City

Boise

State

ID

ZIP Street Address Zip Required

83720

YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

HOLD FOR PICK-UP AT THIS FEDERAL EXPRESS LOCATION:
Street Address (See Service Guide or Call 800-238-5355)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No. ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card
☐ Cash

City State

Federal Express Use

Base Charges

Declared Value Charge

Origin Agent Charge

ZIP * Zip Code of Street Address Required

Emp. No.

Date

☐ Cash Received

☐ Return Signature

☐ Return Part

☐ Chg. To Del.

☐ Chg. To Hold

Street Address

Other

City

State

Zip

Total Charges

Received By:

X

Date/Time Received

FedEx Employee Number

PART #2041738900
REC-5-750-40/25
REVISION DATE 5/87
PRINTED U.S.A. SRCE

007

**SERVICES
CHECK ONLY ONE BOX**

**DELIVERY AND SPECIAL HANDLING
CHECK SERVICES REQUIRED**

1 ☐ **PRIORITY 1**
Overnight Delivery
Using Your Packaging
2 ☐ **OVERNIGHT DELIVERY**
Using OUR PACKAGING
3 ☐ Courier-Pak Overnight Envelope*
12" x 15"
4 ☐ Overnight Box
12 1/2" x 7 1/2" x 3" A ☐
5 ☐ Overnight Tube
38" x 8" x 6" B ☐
*Declared Value Limit \$100.
STANDARD AIR
Delivery not later than
second business day

1 ☐ **HOLD FOR PICK-UP**
(Fill in Section H at night)
2 ☒ **DELIVER WEEKDAY**
3 ☐ **DELIVER SATURDAY** (Extra charge)
4 ☐ **DANGEROUS GOODS**
(P-1 and Standard Air Packages only; Extra charge)
5 ☐ **CONSTANT SURVEILLANCE SERVICE (CSS)**
(Extra charges (Do Not Complete Section 5))
6 ☐ **DRY ICE** Use _____
7 ☐ **OTHER SPECIAL SERVICE** _____
8 ☐
9 ☐ **SATURDAY PICK-UP**
(Extra charge)
10 ☐

JAN 04 1991

Total Total Total
Received At
1 ☐ Regular Stop
2 ☐ On Call Stop
Drop Box 4 ☐ B.S.C. 5 ☐ Station

Federal Express Corp. Employee No.

Date/Time For Federal Express Use

SERVICE COMMITMENT
PRIORITY 1 - Delivery is scheduled early next business morning in most locations. It may take two or more business days if the destination is outside our primary service areas.
STANDARD AIR - Delivery is generally next business day or not later than second business day. It may take three or more business days if the destination is outside our primary service areas.
Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.
Release
Signature:

LAW OFFICES OF

Dunn & Clark, P.A.

115 No. CLARK, P.O. Box 276

RIGBY, IDAHO 83442

AREA 208/745-9202

ROBIN D. DUNN

STEPHEN CLARK

July 31, 1990

RECEIVED
AUG 1 1990

State of Idaho
Department of Water Resources
1301 North Orchard Street
Statehouse Mail
Boise, ID 83720

Department of Water Resources

Re: City of Roberts/Proof of Beneficial Use

Dear Sirs:

Enclosed please find a Proof of Beneficial Use for the City of Roberts. If there are any problems, please feel free to contact me.

Very truly yours,


Stephen J. Clark, Esq.
Attorney for City of Roberts

SJC/bc
Enclosure

MICROFILMED

JAN 14 1991

ESTIMATE SHEET

Sales — Service — Repair
All Types Pumps • Turbine Specialists
ED (E.T.) WALKER • 745-8767
P.O. Box 51 • Rigby, Idaho 83442

CUSTOMER CITY OF ROBERTS

DEALER _____

APPLICATION Flow Measurement Port

WHAT IS REQUIRED:

PUMP CAPACITY: _____ GPM _____ HEAD _____ RPM _____ PUMP SETTING _____ FT.

NO. UNITS _____ LIQUID _____ SP. GRAVITY VISC. _____

PUMP BOWL

ASSEMBLY CURVE NO. EFF. % RPM

STAGES	X	FT. =	LAB. HD. FT.	GPM X
--------	---	-------	--------------	-------

3850 X

IMPELLER DATA A. THRUST ____ K X ____ TDM X SP. GR. ____ = ____ LBS.

MATERIALS

AFFECTING **B. SHAFT WT./FT. _____ X LENGTH FT. _____ = _____ LBS.**
PERFORMANCE

C. A + B = TOTAL THRUST = _____ LBS. X .0075 HP LOSS / 100 P.

QUOTE NO. _____

QUOTED BY Tim

PAGE _____

DATE 7/19/80

WELL I. DIA. _____ INCHES

HEAD ABOVE _____ FEET

HEAD BELOW _____ FEET

COL. FRICT. LOSS _____ FEET

TOTAL HEAD _____ FEET

HEAD

EFF. X _____ SPEC. GR. ■ _____ HP.

SHAFT LOSS = _____ HP.

TOTAL HP: _____

[illegible]



P.O. Box 51
Rigby, Idaho 83442
(208) 745-8767
FAX 745-8769

July 23, 1990

Mark Tanner
City of Roberts
Roberts, Idaho 83444

REFERENCE: Flow Meter Installation

Dear Sir:

In reference to your request for bid for installation of flow meter access on your pumps. We would like to advise you that it is our experience that most existing pump installations will not meet minimum upstream and downstream dimension requirements for accurate flow readings. Therefore, readings can be 5% to 25% low. We have also found, in most cases, there is not enough room for the necessary changes.

Please call me if you have further questions concerning the Department of Water Resources requirements for flow meter installation.

Respectfully,

E.T. Walker
President

MICROFILMED

JAN 04 1991

138773
May 31, 1990

CITY OF ROBERTS
19 W. PARK AVE.
ROBERTS, ID 83444

PROOF DUE NOTICE

RE: PERMIT NO. 35-08712

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, 1990. (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

JAN 04 1991

S T A T E O F I D A H O
D E P A R T M E N T O F W A T E R R E S O U R C E S

Statehouse
Boise, Idaho 83720
(208) 334-7900
July 12, 1989

CITY OF ROBERTS
19 WEST PARK AVE
ROBERTS, ID 83444

P E R M I T A P P R O V A L N O T I C E

RE: PERMIT NO. 35-08712

Dear Permit Holder:

Enclosed is a copy of your approved application for permit. We direct your attention to the conditions of approval on the final page.

Also enclosed is a copy of the approved drilling permit submitted in connection with this water right.

You should be aware that the groundwater you propose to divert is located within a drainage basin where surface waters are regulated during the months of low flow. It is possible that diversion of groundwater may have an adverse impact on these surface water flows. Information available to us at this time does not warrant refusing to issue permits in your area, but we do caution that diversions of groundwater are not allowed to deplete flows available for surface water users with earlier priority dates. Siting your well as far from surface sources as possible and casing out upper water producing zones may reduce the potential of interference.

Section 42-235, Idaho Code, requires that a "drilling permit" must be obtained from the department for all wells constructed after July 1, 1987. A drilling permit is a separate permit that must be issued in addition to your permit to appropriate water. Commencement of well construction or diversion of water under your permit to appropriate water is prohibited unless a drilling permit is obtained.

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. Also enclosed for your convenience is a form entitled "Proof of

Beneficial Use" that must be submitted to the Department when your project is completed. If development is complete, you may submit proof of beneficial use immediately.

Sincerely,

GARY SPACKMAN, Supervisor
Water Right Permits Section

GS: SC
Enclosures

ML **RECEIVED**

AUG 18 1989

State of Idaho
Department of Water Resources

DRILLING PERMIT

(Authorizing Construction of a Well)*

RECEIVED

MAR 9 1989

Department of Water Resources
Eastern District Office

1. Applicant CITY OF ROBERTS
2. Address 19 WEST PARK AVENUE
ROBERTS, IDAHO 83444

☒ Well Owner ☐ Well Operator ☐ Other, specify _____

3. Water right permit no. _____; Injection well permit no. _____

4. Proposed well location SW 1/4 SE 1/4 SW 1/4, or Gov't lot No. _____,
Sec. 33, Twp. 5 N, Rge. 37 E, County JEFFERSON,
Lot, block and subdivision _____

5. Proposed use of well: (Check all that apply)
☐ Domestic ☐ Stockwater ☐ Monitoring
☐ Irrigation ☐ Industrial ☒ Municipal
☐ Injection ☐ Other, Specify _____

6. Well construction information:
☒ New well ☐ Deepen ☐ Replace
Proposed surface diameter 6-inch Proposed depth 40-feet

Anticipated bottom hole temperature:

☒ 85°F or less (Cold water well)
☐ 85°F to 212°F (Low temp. geothermal well)
☐ 212°F or more (Geothermal well)

7. Anticipated construction start date May 15, 1989

8. Well Driller (if known) _____

Address _____

Date March 1, 1989 Applicant's signature Loren A. [Signature]

Title Mayor

AUG 18 1989

(✓) Approved () Denied

The approval of this permit authorizes the construction of a well as described on this application subject to the conditions on this permit.

GENERAL CONDITIONS:

1. The well must be constructed in compliance with the applicable statutes, specific conditions of approval shown on the water right permit, injection well permit, transfer or amendment and the rules and regulations of the Department for water appropriation, injection wells and well construction standards.
2. This drilling permit is valid for two (2) months from its date of issuance for the start of construction and is valid for one (1) year from the date of issuance for completion of the well unless an extension has been granted.
3. The permit holder or his representative shall notify the Department ten (10) days prior to the start of construction unless good cause for later notification can be shown.
4. The well shall be constructed by a driller currently licensed in the State of Idaho who must maintain a copy of the drilling permit at the drilling site.
5. Issuance of this drilling permit does not authorize trespass on the land of another party.
6. This permit does not constitute other local, county, state or federal approvals which may be required for construction of a well.

SPECIFIC CONDITIONS:

Dated this 10th day of July, 19 89.

Signed

Title

T. John Sartor
Chief, Water Alloc Bur

Received by SM Fee \$ 100.00 ✓ Date 3-16-89

Receipt No. E006174 Construction start date

Construction start extension to

Extension approved by

Microfilm

AUG 18 1989

April 24, 1989

City of Roberts
19 W. Park Ave.
Roberts, ID 83444

RE: Application for Permit No. 35-8712

Dear Water Right Applicant:

The Department of Water Resources acknowledges receipt of your water right permit. The application has been assigned the above identification No. Please refer to this number in all further correspondence.

This office is currently in the process of advertising the application in the Jefferson Star. The advertisement will be published for two consecutive weeks, and a period of ten days following the second publication will be allowed for the submittal of protests.

If the application is protested, you will be sent a copy of the protest. The protest must be resolved before the application is approved or denied. If the protest is not resolved voluntarily, this Department will conduct a conference and/or hearing on the matter.

If the application is not protested, it will be forwarded to our state office in about five weeks. State office personnel will conduct a complete review prior to final processing of the application and will notify you of the outcome of this review. When a permit is issued, you will be sent a copy. A typical processing time for an unprotested application is about eight weeks.

Please feel free to contact this office if you have any questions regarding this procedure.

Sincerely,

HAROLD W. JONES
Water Rights Supervisor

HWJ/rb

MICROFILMED

AUG 18 1989

AFFIDAVIT OF PUBLICATION

STATE OF IDAHO)
) ss
County of Jefferson)

I, Crystal Foster
of the Jefferson Star, published
weekly at Rigby, Jefferson County,
Idaho, do solemnly swear that the
Notice of Application
a copy of which notice appears at-
tached hereto, was published in the
regular and entire issue of said
newspaper, and not in any supple-

ment issue thereof for Two (2)
consecutive issues, the first publica-

having been made on 5-3-89
and the last publication having been
made on 5-10-89.

Further, that said newspaper is one
of general circulation in said coun-
ty; that it is a legal newspaper, con-
forming to legal specifications
under the Idaho Statutes; that it has
as least two hundred bona fide
subscribers living within the county
of publication; and that it has been
continuously and uninterruptedly
published in said county during a
period of seventy-eight consecutive
weeks prior to the first publication
of the said notice.

Crystal Foster

On this 12th day of May
in the year of 1989, before
me, a Notary Public, personally ap-

peared Crystal Foster,
known or identified to me to be the
person whose name subscribed to
the within instrument, and being by
me first duly sworn, declared that
the statements therein are true, and
acknowledged to me that he ex-
ecuted the same.

Karla K. Tew
Notary Public for Idaho
Residing at Idaho
My commission expires: 10-23-94

NOTICE OF APPLICATION FOR WATER RIGHT

The Following application(s) have
been filed to appropriate the public
waters of the State of Idaho:
35-08712

CITY OF ROBERTS
19 WEST PARK AVE
ROBERTS, ID 83444
Source: GROUNDWATER
Diversion Pt: SESWSW Sec 33 T 05NR
37E
Use: MUNICIPAL (200 CFS)
Date Filed: 3/10/1989
In: T05N R37E S33 SWSW

The permit(s) will be subject to all
prior water rights. Protest may be sub-
mitted based on the criteria of Sec. 42-
203A, Idaho Code and/or the new public
interest criteria of Sec. 42-203C, Idaho
Code. Protests must be filed with the
Director, Dept. of Water Resources, 150
Shoup Ave., Suite 15, Idaho Falls,
Idaho 83402 on or before MAY 22,
1989.

R. Keith Higginson, Director
Published in the Jefferson Star,
Rigby Idaho, May 3 and 10, 1989.

MICROFILMED RECEIVED

AUG 18 1989

MAY 16 1989

Department of Water Resources
Eastern District Office

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
Eastern Region
150 Shoup Ave., Suite 15

Idaho Falls, Idaho 83402
(208) 525-7161

APRIL 21, 1989

THE JEFFERSON STAR
P.O. BOX 37
RIGBY, ID 83442

Gentlemen:

Enclosed you will find a legal notice which we wish to have published on the dates indicated (once a week for two consecutive weekly issues) in your newspaper. If you cannot publish the notice on the proposed dates, please contact us immediately.

An affidavit of publication must be submitted to the Department along with the publication bill. Your cooperation is appreciated.

Please send the affidavit of publication and publication billing to this office before MAY 22, 1989.

Yours truly,

Rita Bodell
Secretary

Encl.

MICROFILMED

AUG 18 1989

NOTICE OF APPLICATION FOR WATER RIGHT

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

MINOR REVENUE

AUG 18 1989

35-08712

CITY OF ROBERTS
19 WEST PARK AVE
ROBERTS, ID 83444

Source: GROUNDWATER

Diversion Pt:

SESWSW Sec 33 T 05N R 37E
(.200 CFS)

Use: MUNICIPAL

Date Filed: 3/10/1989

In: T05N R37E S33

SWSW

**NOTICE OF APPLICATION FOR
WATER RIGHT**

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

35-08712

**CITY OF ROBERTS
19 WEST PARK AVE
ROBERTS, ID 83444**

Source: GROUNDWATER

Diversion Pt: SESWSW Sec 33 T 05N R
37E

Use: MUNICIPAL (.200 CFS)

Date Filed: 3/10/1989

In: T05N R37E S33 SWSW

The permit(s) will be subject to all
prior water rights. Protest may be sub-
mitted based on the criteria of Sec. 42-
203A, Idaho Code and/or the new public
interest criteria of Sec. 42-203C, Idaho
Code. Protests must be filed with the
Director, Dept. of Water Resources, 150
Shoup Ave., Suite 15, Idaho Falls,
Idaho 83402 on or before MAY 22,
1989.

R. Keith Higginson, Director

*Published in the Jefferson Star,
Rigby, Idaho, May 3 and 10, 1989.*

MICROFILMED

AUG 18 1989

The permit(s) will be subject to all prior water rights. Protests may be submitted based on the criteria of Sec. 42-203A, Idaho Code and/or the new public interest criteria of Sec. 42-203C, Idaho Code. Protests must be filed with the Director, Dept. of Water Resources, 150 Shoup Ave., Suite 15, Idaho Falls, Idaho 83402 on or before MAY 22, 1989.

R. Keith Higginson, Director

Published 5/03/1989 & 5/10/1989

MICROFILMED

AUG 18 1989

FROM KEITH C. Wilson

DATE 10 April 89

TO File

SUBJECT P/D & P/u for City of Roberts Application

Discussions with Mark Tanner (City of Roberts) and Willie Teuscher (Forsgren-Associates) confirmed the P/D & P/u to be SE $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec 33, T5N, R37E.

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AUG 18 1989


SIGNATURE

FROM KEITH C. WILSON

DATE 10 April 89

TO File

SUBJECT Roberts - municipal

Phone call to Jefferson County Assessor
confirmed that Roberts is incorporated

MICROFILMED

AUG 18 1989


SIGNATURE

WHITE - State Auditor
 YELLOW - Remittance Advice
 PINK - State Auditor then Agency
 GOLDENROD - Agency Copy

EXPENDITURE VOUCHER

STATE OF IDAHO
 Office of State Auditor

AUDITOR USE

AGENCY USE

5272
Date 04/04/89
Code 193002

VENDOR: If you require additional information regarding this payment, please contact the State agency listed below.

AGENCY NAME:

DEPT. OF WATER RESOURCES

Document No.	
Pre-Audit	Date
Warrant No.	

PAY

ROBERTS SEWER WATER ASSOC.
 CITY OF ROBERTS
 19 W. PARK AVE.
 ROBERTS, ID. 83444

TO

CHECK ONE:

☒ MISCELLANEOUS EXPENDITURE☐ STATE CONTRACT☐ PURCHASE ORDER☐ MISCELLANEOUS ENCUMBRANCE REQUISITIONPAYMENT: ☐ PARTIAL ☐ FINAL

Encumbrance Reference No.

LINE No.	PROGRAM	FUND	ACCT.		DESCRIPTION	LINE AMOUNT	AGENCY USE
			Maj	Min			
1	06 30 199	1238	8831		REFUNDS PER R. GARRETT 3/27/89 15.00	15.00	
TOTAL						15.00	

NOTE: Final payment must be accompanied by a receiving copy

TO STATE AUDITOR

Request is hereby made that a warrant be authorized and drawn in payment of the item or items described above. I hereby certify that the items described were ordered by proper authority; that they are necessary in the public service; that the items have been received and accounted for, and that the account as stated is correct and just.

AUDITOR'S CERTIFICATE

I hereby certify that the above account is in proper form; that totals carried hereon are correct; that receipts when required by law or regulation of the State Board of Examiners covering items for which reimbursement is asked are submitted herewith; and that there are funds in the state treasury and balances in appropriation accounts out of which the same may be lawfully paid.

Date

Head of Agency or Institution

MICROFILMED

AUG 18 1989

ACTION REQUIRED

FROM Eastern

TO: Alberta

There seems to be an overpayment of \$15⁰⁰.
App. for permit should be \$30⁰⁰ and \$100⁰⁰ for
drilling permit. A check for \$145⁰⁰ was receipted.
It should reflect \$30⁰⁰ for app. fee, & \$100⁰⁰
for drilling permit.

Thank you

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AUG 18 1963

DATE April 10, 1989

FROM Steve McCormick

TO Don Shaff

SUBJECT Receipt # E00 6174 for the City of Roberts.

This receipt was issued incorrectly.

We need to break it down to:

Application Fee: \$30⁰⁰

Drafting Permit: 100⁰⁰

Overpayment: 15⁰⁰ (To be refunded.)

Thank you. —

S.M.

SIGNATURE

MICROFILMED

AUG 18 1989

RECEIPT
For Monies Paid
to the
IDAHO DEPARTMENT OF WATER RESOURCES

Receipt No: E006174

COPY

Date: 03/16/89
Time: 16:30:38

Received

From: ROBERTS SEWER WATER ASSOC

Type of Payment	Program Acct Class	Amount
APPLICATION FEE	0630199 1238 6390	~~\$145.00~~ 30 ⁰⁰
Drilling Permit	0630350 1238 6390	100 ⁰⁰
Total		<u>\$145.00</u> \$ 130 ⁰⁰

CHECK 1378

OVERPAYMENT OF \$ 15⁰⁰

Idaho Department of Water Resources

Region: EASTERN

Signature: Steve McCormick

MICROFILMED

AUG 18 1989

RECEIPT
For Monies Paid
to the
IDAHO DEPARTMENT OF WATER RESOURCES

Receipt No: E006174

Date: 03/16/89
Time: 16:30:38

Received

From: ROBERTS SEWER WATER ASSOC

Type of Payment	Program Acct Class	Amount
APPLICATION FEE	0630199 1238 6390	\$145.00
	Total	\$145.00

CHECK 1378

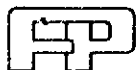
Idaho Department of Water Resources

Region: EASTERN

Signature: Steve McCormick

INDEXED

AUG 18 1989



FORSGREN-PERKINS ENGINEERING, p.a.

LETTER OF TRANSMITTAL

350 North 2nd East, Rexburg ID 83440
75 Yellow Creek Road, Suite #302, Evanston, Wyoming 82930
210 Mallard Dr., Suite D, Boise ID 83706
1849 West North Temple, Suite B, Salt Lake City, UT 84116
125 McGee Street, SE, East Wenatchee, WA. 98801

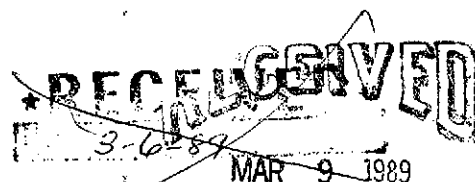
- ☒ REXBURG OFFICE
- ☐ EVANSTON OFFICE
- ☐ BOISE OFFICE
- ☐ SALT LAKE CITY OFFICE
- ☐ WENATCHEE OFFICE

PLEASE REPLY TO

DATE: 3/3/89

PROJECT:

City of Roberts
19 West Park Avenue
P.O. Box 236
Roberts, ID 83444



ATTENTION: Mayor Loren Lounsbury

REFERENCE: Water Facility Improvements

Department of Water Resources
Eastern District Office

WE ARE ENCLOSING:

COPIES	DESCRIPTION
2	Drilling Permit
2	Application for Permit for Water Use

REMARKS: Please mail one copy of the Drilling Permit and Application for Water Use to:

Steve McCormick
Department of Water Resources
150 Shoup Avenue
Idaho Falls, ID 83401

You will also need to send \$145.00 for the permit fees.

If you have any questions, please feel free to call.

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AUG 18 1989

William B. Feuscher
William B. Feuscher kls