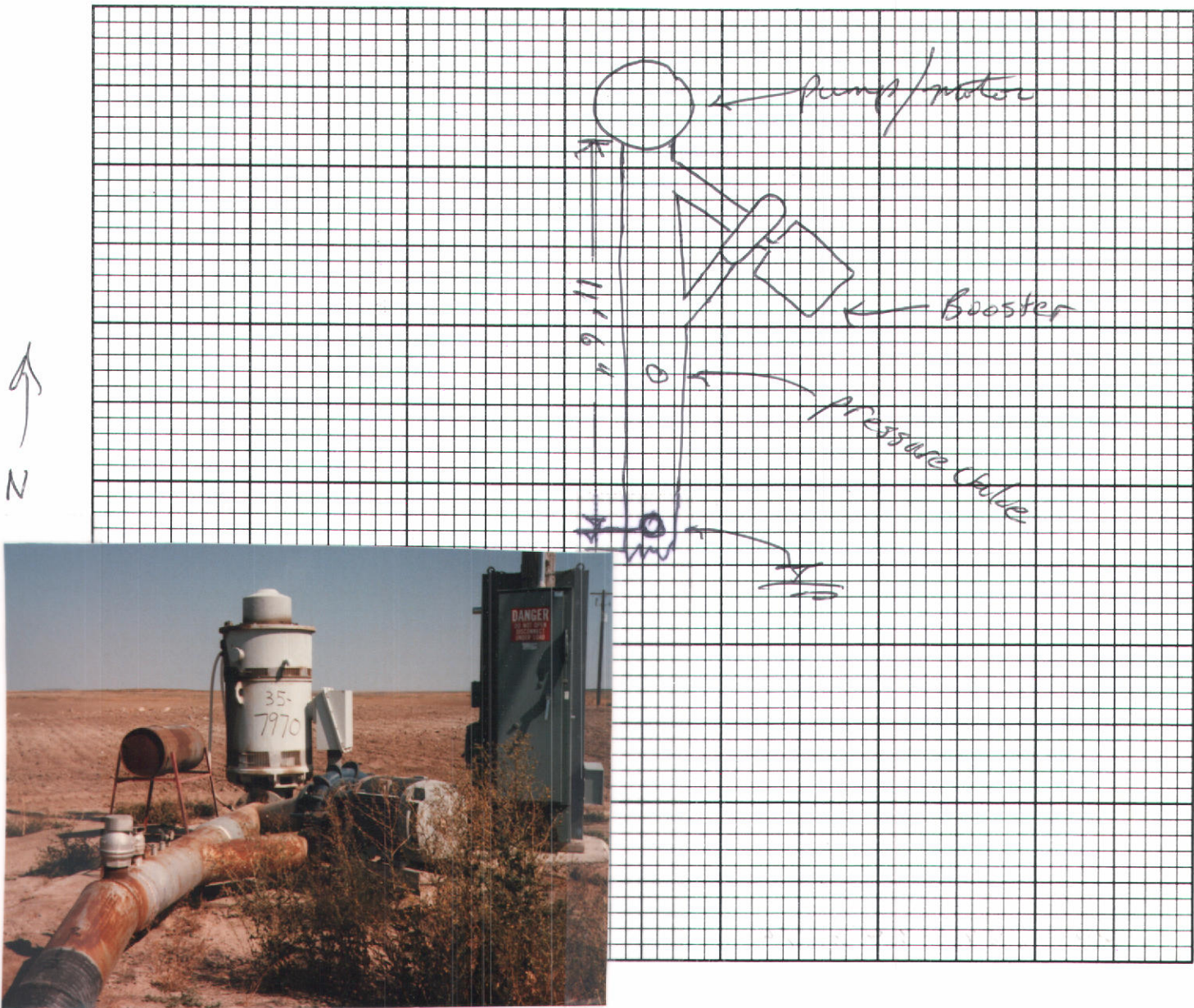


10. Other water rights on these lands _____
11. Other water right diverted from same p.d. _____
12. **Diversion and Delivery System Diagram:** Indicate all major components and distances between components. Indicate ditch size/pipe i.d. as applicable. Indicate on systems with measurement port the distance between the port and the nearest component/pipe bend/restriction both upstream and downstream, and the inside pipe diameter at the measurement port. On multiple diversion systems indicate how diversion systems are connected.



13. ☒ **Photo of Diversion & System Attached** ☒ **Aerial Photo of Place of Use Attached or Map of Irrigated Acreage Attached**

14. Remarks _____

15. 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
16. Examiner's/Consultant's Signature Richard L. Lenoir Jr. Date 8/7/87
- Consultant's License Number _____
- IDWR Director's Authorization to Conduct Beneficial Use Examination _____
- Stacy McLamh

Date _____

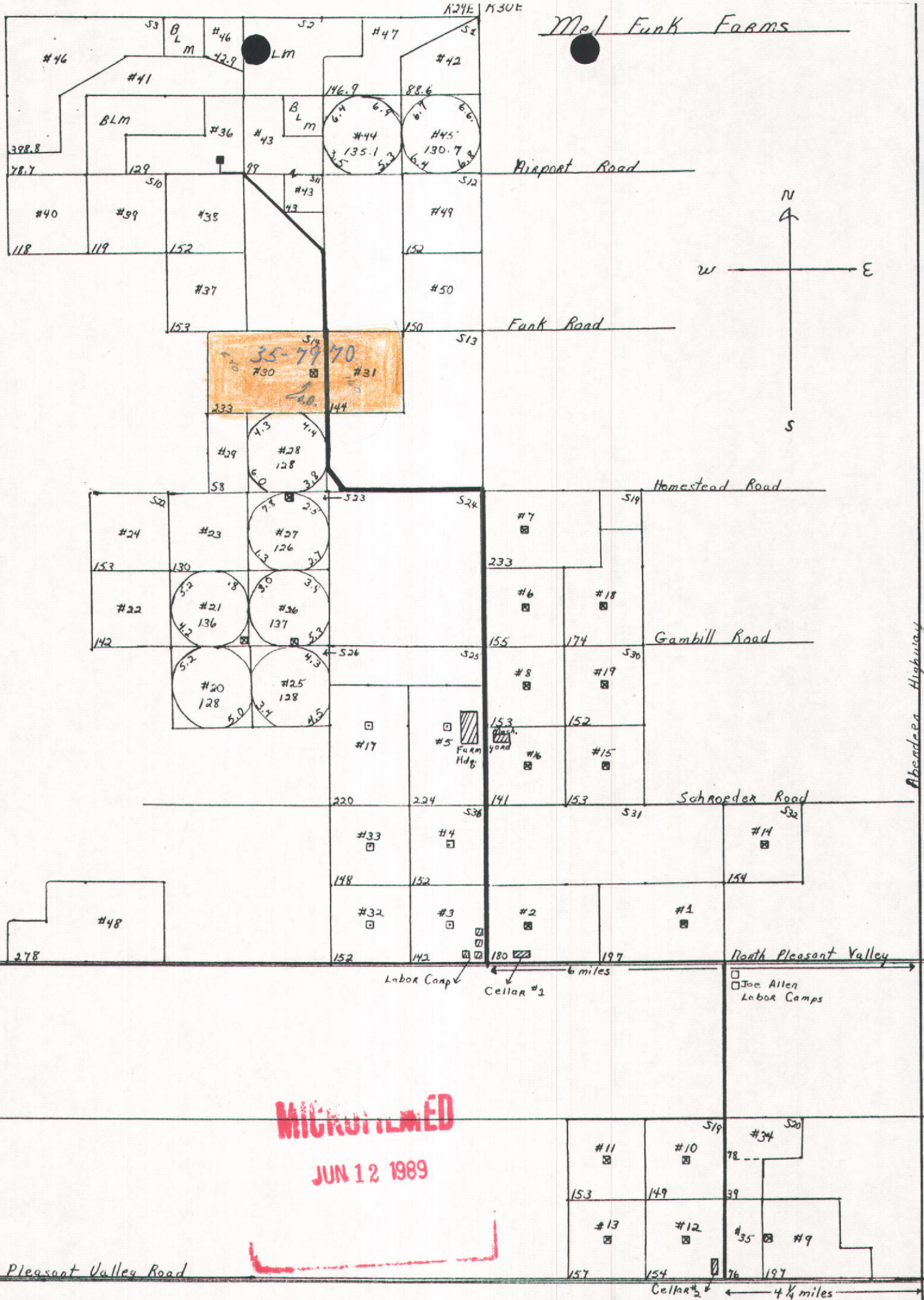
MICROFILMED

JUN 12 1989

CONSULTANT SEAL

Feb
1986

Mel Funk Farms



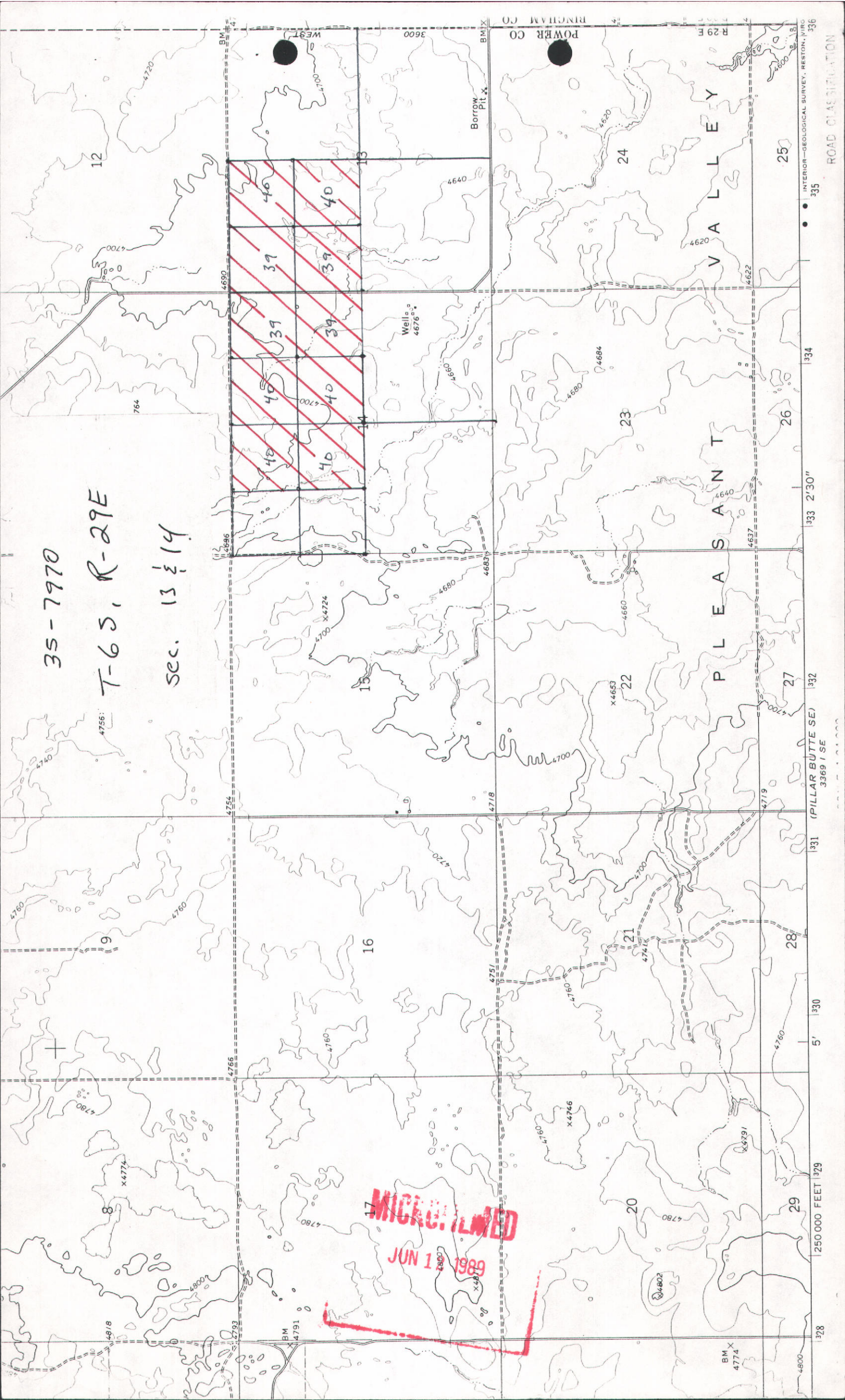
MICROFILMED

JUN 12 1989

South Pleasant Valley Road

Cellar #2 4 1/4 miles

35-7970
T-65, R-29E
sec. 13 & 14



MICROFILMED
JUN 1 1989

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 35-07970

Priority: March 23, 1981

Maximum Diversion Rate:
Annual Consumptive Volume:

6.69 CFS
1188.0 AF

This is to certify, that THE TRAVELERS INSURANCE CO.
MELVIN R. FUNK

960 BROADWAY
SUITE 310
BOISE, ID 837063623

has complied with the terms and conditions of the permit issued pursuant to Application for Permit dated March 23, 1981, and has submitted proof to the Department of Water Resources on May 24, 1985, that water has been applied to a beneficial use; an examination by the Department indicates that the works have a diversion capacity of 6.690 cfs of water from a GROUNDWATER source and that a water right has been established as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>	<u>ANNUAL VOLUME</u>
IRRIGATION	04/01 to 11/01	6.69 CFS	1188.0 AF

LOCATION OF POINT(S) OF DIVERSION: SENE, Sec. 14, Township 06S, Range 29E
POWER County

PLACE OF USE: IRRIGATION

<u>TWN</u>	<u>RGE</u>	<u>SEC</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>ACRES</u>	<u>TOTAL</u>
06S	29E	13	NENW 40	NWNW 39	SWNW 39		158
			SENW 40				
		14	NENE 39	NWNE 40	SWNE 40		238
			SENE 39	NENW 40	SENW 40		
Total number of acres irrigated:							396

CONDITIONS/REMARKS:

1. The right to the use of water hereby confirmed is limited to the amount which can actually be beneficially used and is restricted and appurtenant to the lands or place of use and to the purpose herein described, as provided by the laws of Idaho.
2. This right is subject to all prior water rights and may be forfeited by five years of non-use.
3. Modifications to or variance from this license must be made within the limits of Section 42-222, Idaho Code, or the applicable Idaho law.

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 17th day of MAY, 1989.

MICROFILMED

JUN 12 1989

Acting for

R. Keith Higginson
R. Keith Higginson, Director

WATER RIGHT SPLIT

SUMMARY

ACTION	RIGHT NO.	NAME	AMOUNT CFS
Original Permit	35-7970	Melvin R. Funk	8.00 cfs
Full Assignment	35-7970	Melvin R. Funk and Travelers Insurance Co.	8.00 cfs

RECEIVED

RECEIVED

SEP 4 1984

STATE OF IDAHO

DEPARTMENT OF RECLAMATION

ASSIGNMENT OF PERMIT

Department of Water Resources

Melvin R. Funk and

I, Melvin R. Funk, hereby assign to Travelers Insurance Co
 of Route 1, Box 142, American Falls, Idaho 83211 and 960 Broadway, Suite 310, Boise, ID 83706-3623
 Name
 Address

CHECK ONE

- ☒ All my right, title, and interest, in and to Permit No. 35-7970
 to appropriate the public waters of the State of Idaho.
- ☐ The following described portion of my right, title, and interest in and
 to Permit No. _____ to appropriate the public waters of the State
 of Idaho. (Give that portion of the permit being assigned by describing
 the land list and the point of diversion - describe by acreage within
 each 40-acre subdivision.)

Made this 9th day of July August, 1984.

Melvin R. Funk
 Permit Holder
 Melvin R. Funk
Diane A. Funk
 Wife of Permit Holder
 Diane A. Funk

State of Idaho)
 County of POWER) ss.

On this NINTH day of AUGUST, 1984, personally
 appeared before me the signer(s) of the above instrument, who duly acknowledged
 to me that he (she) (they) executed the same.

Mary C. Colville
 Notary Public residing at _____
 ROCKLAND, IDAHO

My commission expires LIFE

RECEIVED

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 Melvin R. Funk Phone 226-5207

Post office address Rt. #1, Box 142 American Falls, Idaho

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

3. Location of point of diversion is SE $\frac{1}{4}$ of NE $\frac{1}{4}$ of Section 14 Township 6S

Range 29E B.M. Power County, additional points of diversion if any: _____

pump #34, field 34 & 25

4. Water will be used for the following purposes:

Amount 8.00 cfs for Irrigation purposes from 4/1 to 11/1 (both dates inclusive)
(cfs or acre-feet per annum)

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

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

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

5. Total quantity to be appropriated:

a. 8.00 cfs cubic feet per second and/or b. _____ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. Well, pump and sprinkler system

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

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

c. Proposed well diameter is 20 inches; proposed depth of well is 475 feet.

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

8. Description of proposed uses:

a. If water is not for irrigation:

(1) Give the place of use of water: _____ $\frac{1}{4}$ of _____ $\frac{1}{4}$ of Section _____ Township _____

Range _____ B.M. _____

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

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

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

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

[illegible]

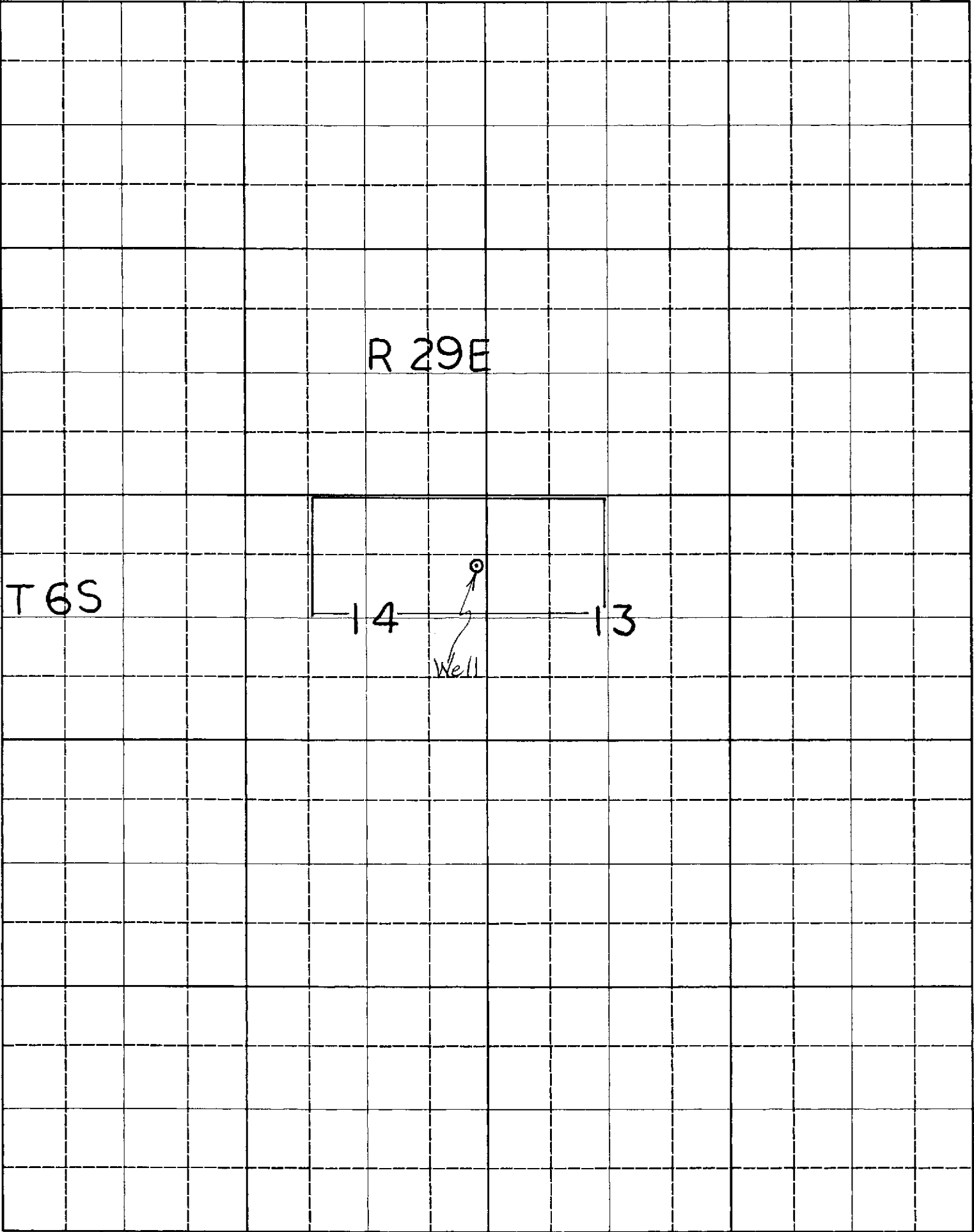
9. a. Who owns the property at the point of diversion _____ Applicant

b. Who owns the land to be irrigated or place of use _____ Applicant

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

10. Remarks

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.

Melvin R. Link
(Applicant)

UNRECORDED

Chief, Operations Bureau

A. Alan Gayton

Witness my hand this 6th day of May, 1981.

An access port or other device as specified by the Department shall be installed by the permit holder to provide for the installation of measuring equipment and the determination of the rate of diversion by the Department.

d. Other:

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.

for _____ May 1, 1986.

b. Proof of construction of works and application of water to beneficial use shall be submitted on or before

a. SUBJECT TO ALL PRIOR WATER RIGHTS.

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

of Idaho No. 35-7970, and said application is hereby approved _____.

This is to certify that I have examined Application for Permit to appropriate the public waters of the State

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

Recommended for approval _____ denial _____ by *ENG* *RG*

Hearing held by _____ Date _____

Copies of protests forwarded by _____

Protests filed by: *1/eng* _____

Publication approved _____ Date _____

Publication dates _____

Published in *Power Co. Record* _____

Publication prepared by *kw* Date *3/27/81* _____

Received by *kw* Date *3/26/81 #17128* _____

Preliminary check by *kw* Fee \$ *185.00* _____

Received by *ENG* *drafted* Date *3/23/81* Time *4:30* _____

Proposed Priority

3/23/81

RECEIVED

APR 14 1981

Department of Water Resources
Eastern District Office

Right of Publication

AHO }
POWER } S.S.

Crompton being first duly sworn

is the Editor Manager
County Press, a newspaper of general circulation
County, Idaho, published weekly at American Falls;
that said newspaper has been published
uninterruptedly and continuously for over seven
years, prior to the first publication
of advertisement:

next notice or advertisement was published
attached in the regular and entire edition of

not in any supplement thereof for
weekly issues thereof, the date of the first publication

day of April, 1981

publication being the

day of April, 1981

(Signed) Brett Cho

I sworn to before me this

day of April, 1981

Notary Public, residing at American Falls, Idaho.

My Commission expires the

day of April, 1981

Published in the Power County Press April 1, 1981 and April 8, 1981
NOTICE OF APPLICATION FOR WATER RIGHT

Notice is hereby given that the following application(s) have been submitted for permit to appropriate the public waters of the State of Idaho:

35-7961
BAUER, EMIL &/or JOHN
434 TAYLOR, AMERICAN FALLS, ID 83211
Source: GROUNDWATER
Date Filed: 03/20/1981
Amount: 4.17 CFS
Diversion Point: SENE Sec 17 T 07S R 30E NWNE NESE SENW Sec 20 T 07S R 30E, Power County
Use: IRRIGATION (4.17 CFS) from 04/01 to 11/01
Place of Use: NESE NWSE SWSE SESE Sec 17 T 07S R 30E NENE NWNE SWNE SENE SENW NESE Sec 20 T 07S R 30E NENW NWNW Sec 21 T 07S R 30E FOR 478 ACRES
Diversion Means: WELLS, PUMPS & PIPELINE.

35-7964
FUNK, MELVIN R.
RT. 1 BOX 142, AMERICAN FALLS, ID 83211
Source: GROUNDWATER
Date Filed: 03/23/1981
Amount: 6.40 CFS
Diversion Point: NENE Sec 23 T 06S R 29E, Power County
Use: IRRIGATION (6.40 CFS) from 04/01 to 11/01
Place of Use: NESE NWSE SWSE SESE Sec 14 T 06S R 29E NENE NWNE SWNE SENE Sec 23 T 06S R 29E FOR 320 ACRES
Diversion Means: WELL, PUMP & SPRINKLERS.

35-7965
FUNK, MELVIN R.
RT. 1 BOX 142, AMERICAN FALLS, ID 83211
Source: GROUNDWATER
Date Filed: 03/23/1981
Amount: 6.40 CFS
Diversion Point: SWSE Sec 23 T 06S R 29E, Power County
Use: IRRIGATION (6.40 CFS) from 04/01 to 11/01
Place of Use: NESE NWSE SWSE SESE Sec 23 T 06S R 29E NENE NWNE SWNE SENE Sec 26 T 06S R 29E FOR 320 ACRES
Diversion Means: WELL, PUMP & SPRINKLERS.

35-7967
FUNK, MELVIN R.
RT. 1 BOX 142, AMERICAN FALLS, ID 83211
Source: GROUNDWATER
Date Filed: 03/23/1981
Amount: 2.94 CFS
Diversion Point: SWNW Sec 25 T 06S R 29E, Power County
Use: IRRIGATION (2.94 CFS) from 04/01 to 11/01
Place of Use: SWNW SENW NESW NWSW SWSW SESW Sec 25 T 06S R 29E FOR 240 ACRES
Diversion Means: WELL, PUMP & SPRINKLERS.

35-7968
FUNK, MELVIN R.
RT. 1 BOX 142, AMERICAN FALLS, ID 83211
Source: GROUNDWATER
Date Filed: 03/23/1981
Amount: 6.40 CFS
Diversion Point: SWSE Sec 01 T 06S R 29E, Power County
Use: IRRIGATION (6.40 CFS) from 04/01 to 11/01
Place of Use: NESW NWSW SWSW SESW NESE NWSE SWSE SESE Sec 01 T 06S R 29E FOR 320

ACRES
Diversion Means: WELL, PUMP & SPRINKLERS.

35-7969
FUNK, MELVIN R.
RT. 1 BOX 142, AMERICAN FALLS, ID 83211
Source: GROUNDWATER
Date Filed: 03/23/1981
Amount: 7.13 CFS
Diversion Point: SESE Sec 12 T 06S R 29E, Power County
Use: IRRIGATION (7.13 CFS) from 04/01 to 11/01
Place of Use: NENE NWNE SWNE SENE NESE NWSE SWSE SESE Sec 12 T 06S R 29E FOR 320 ACRES
Diversion Means: WELL, PUMP & SPRINKLERS.

35-7970
FUNK, MELVIN R.
RT. 1 BOX 142, AMERICAN FALLS, ID 83211
Source: GROUNDWATER
Date Filed: 03/23/1981
Amount: 8.00 CFS
Diversion Point: SENE Sec 14 T 06S R 29E, Power County
Use: IRRIGATION (8.00 CFS) from 04/01 to 11/01
Place of Use: NENW NWNW SWNW SENW Sec 13 T 06S R 29E NENE NWNE SWNE SENE NENW SENW Sec 14 T 06S R 29E FOR 400 ACRES
Diversion Means: WELL, PUMP & SPRINKLERS.

If issued, the permit(s) will be subject to all prior water rights. Protection against the granting of any permit must be filed with the Director of the Idaho Department of Water Resources, 150 Shoup Ave., Idaho Falls, Idaho 83401 on or before APRIL 20, 1981.

C. STEPHEN ALLRED
Director

35-7970

FUNK, MELVIN R.
RT. 1 BOX 142, AMERICAN
FALLS, ID 83211

Source: GROUNDWATER

Date Filed: 03/23/1981

Amount: 8.00 CFS

Diversion Point: SENE Sec 14 T 06S
R 29E, Power County

Use: IRRIGATION (8.00 CFS)
from 04/01 to 11/01

Place of Use: NENW NWNW
SWNW SENW Sec 13 T 06S R 29E

NENE NWNE SWNE SENE

NENW SENW Sec 14 T 06S R 29E
FOR 400 ACRES

Diversion Means: WELL, PUMP &
SPRINKLERS

If issued, the permit(s) will be sub-
ject to all prior water rights. Protests
against the granting of any permit
must be filed with the Director of the
Idaho Department of Water
Resources, 150 Shoup Ave., Idaho
Falls, Idaho 83401 on or before
APRIL 20, 1981.

C. STEPHEN ALFRED
Director

May 18, 1989

THE TRAVELERS INSURANCE CO.
MELVIN R. FUNK
960 BROADWAY
SUITE 310
BOISE, ID 837063623

RE: PERMIT NO. 35-07970

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

MICROFILMED

JUN 12 1989

April 11, 1989

THE TRAVELERS INSURANCE CO.
MELVIN R. FUNK
960 BROADWAY
SUITE 310
BOISE, ID 837063623

RE: PERMIT NO. 35-07970

Dear Permit Holder(s):

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

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

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

Sincerely,

JIM JOHNSON
Water Rights Supervisor

JJ:sc

Enclosure

RECEIVED

JUN 12 1989

POINT OF DIVERSION OVER

WR-NUMBER	TWP	RNG	SC	TRACT			LT	#SOURCE	#NAME
				1\4	1\4	1\4			
3507970	06S	29E	14	SE	NE			GROUNDWATER	FUNK, MELVIN R
NO MATCHES FOR THIS POD									

MICROFILMED

JUN 12 1989

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Staff Analysis Sheet
for
Beneficial Use Field Report

35-7970
Permit No.
ESV 11/86

RECEIVED

OCT 23 1987

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/D index ESV 4/1/87 (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 ESV 4/1/87 (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/D'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 R.L. 8-7-87 (Signature of examiner and date)

Exam Reviewed by Senior Water Resource Agent HL 8-25-87 (Initial and date)

Exam Reviewed by Manager of Regional Office SM 10-1-87 (Initial and date)

Exam Date Entered in Computer _____ (Initial and date)

Exam sent to State Office 10/21/87 (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

Permit No. 35-7970

Phone No. 226-5207

1. Owner: Mel Funk Phone No. 226-5207
Current Address: Rt. #1, Box 142 American Falls
2. Accompanied by: BRAD FUNK EXAM. DATE: 8/7/87
Address: _____ Phone No. _____
Relationship to Permit Holder: _____
3. Source: Groundwater tributary to _____

Well/Diversion* No.	Motor Make	HP	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
	Yaskawa	500	0075414801	worthington	NA
Booster ⇒	G.E.	125	LT471029	Cornell	centrifugal pump

*Code with points of diversion, system diagram & photos on reverse side. Disregard if only one.

5. System Description (As operating at time of measurement. Indicate pressure, number of sprinklers, etc.)

Well/pump/booster to 20-1/4 mile hard line (5/32" nozzles)

well depth $\Rightarrow 475'$ bowl depth $\Rightarrow$ water level $\Rightarrow 353'$

Measurement Equipment	Type	Make	Model No.	Serial No.	Size	Calib. Date
Annubar				191157	12"	
manometer					48"	
eagle-eye						

7. Measurements *mainline Od. $\Rightarrow$ Id $\Rightarrow$ 12"* ☐ Additional data/computation sheets attached

Manometer $\Rightarrow 36.2'' - 6.5'' = 29.7''$

eagle-eye →

main line pressure = 60

- | 8. Point(s) of Diversion: | Indicate Method of Determination |
|---------------------------|----------------------------------|
|---------------------------|----------------------------------|

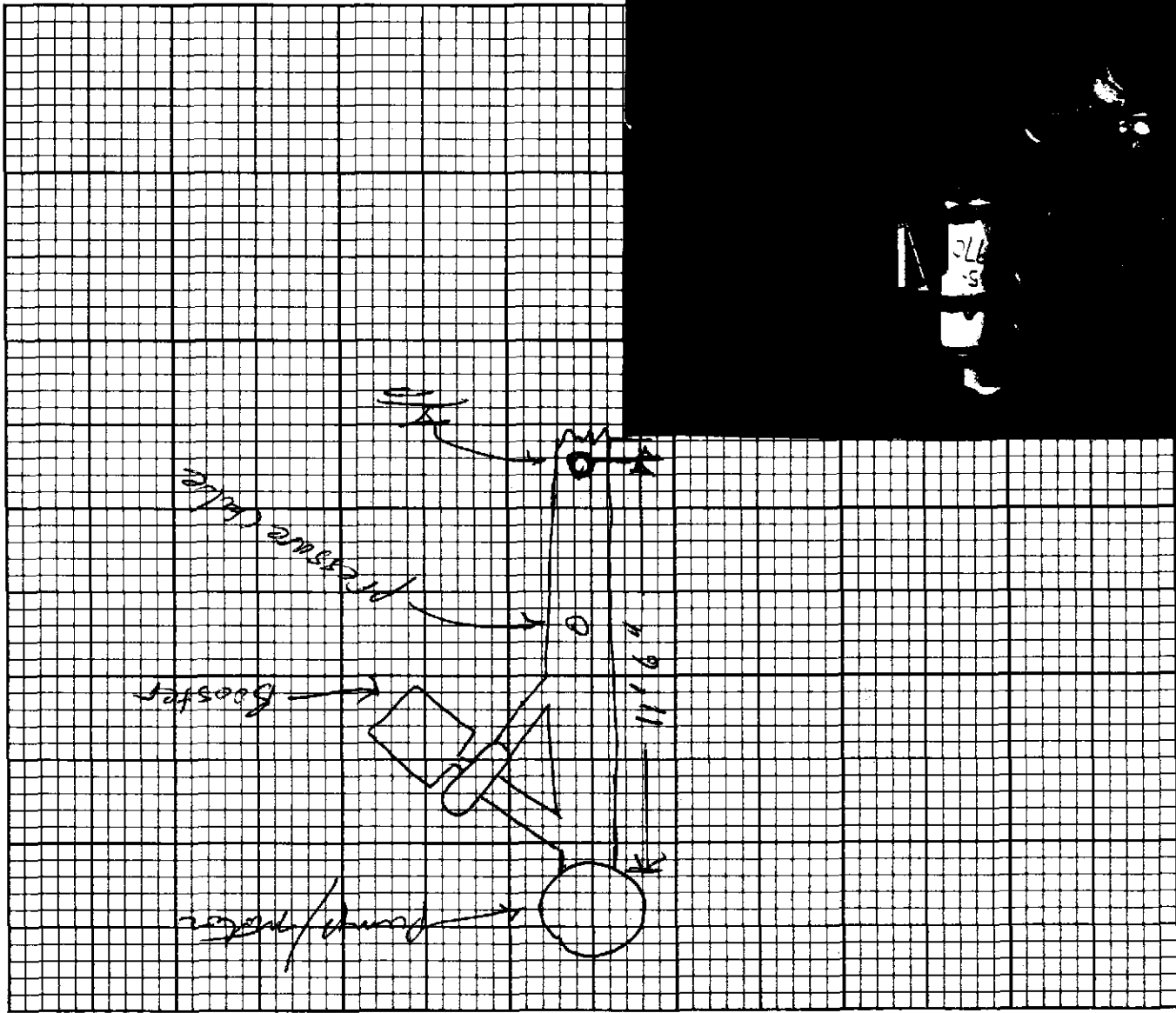
[illegible]

- | | | |
|----|------------------|---|
| 9. | Place(s) of Use: | Irrigation - give acres served by system at time of exam.
Indicate Method of Determination _____ |
|----|------------------|---|

[illegible]

10. Other water rights on these lands _____
11. Other water right diverted from same p.d. _____

12. **Diversion and Delivery System Diagram:** Indicate all major components and distances between components. Indicate ditch size/pipe i.d. as applicable. Indicate on systems with measurement port the distance between the port and the nearest component/pipe bend/restriction both upstream and downstream, and the inside pipe diameter at the measurement port. On multiple diversion systems indicate how diversion systems are connected.



13. ☒ Photo of Diversion & System Attached
- ☒ Aerial Photo of Place of Use Attached or Map of Irrigated Acreage Attached

14. Remarks _____

15. Recommended Amendments
- ☐ Change P.D. as reflected above
- ☐ Change P.U. as reflected above
16. Examiner's/Consultant's Signature _____ Date 8/7/87
- Consultant's License Number _____
- IDWR Director's Authorization to Conduct _____
- Beneficial Use Examination _____
- Date _____
- CONSULTANT SEAL

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
LICENSING REPORT

35-7970
Permit No.

1. Measurement Calculations

a) Field Measurement Calculations (Include theoretical capacities and system capacity)

Annular correction Factor
↓

$$Q = \frac{\text{Pipe I.d.}^2 \times \text{P.H.d.} \times \text{Annular correction Factor}}{448.8 \text{ cfs}} = 6.69 \text{ cfs.}$$

Pipe I.d. $\nearrow$ P.H.d. $\nearrow$

Hp Assigned eFF.
↓

$$\text{Theoretical } Q (\text{motor}) = \frac{(500)(8.814)(.80)}{353' + (40 \times 2.208)} = 7.92 \text{ cfs.}$$

psi

$$Q (\text{Booster}) = \frac{(125)(8.814)(.80)}{1' + 60 \times 2.208} = 6.32 \text{ cfs.}$$

b) Volume Calculations for Irrigation:

$$\begin{aligned} V_{I.R.} &= (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = (396)(3.5) = 1,386.00 \\ V_{D.R.} &= [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = (6.69)(211)(1.9835) = 2,839.70 \\ V &= \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 1,386.00 \end{aligned}$$

~~b)~~ Volume Calculations for Other Uses:

2. Overlap Review

a) Other water rights with same place of use: None

b) Other water rights with same point of diversion: None

~~c)~~ Analysis:

MICROFILMED

JUN 12 1989

RECOMMENDED AMOUNTS

Permit No.	Priority	Amount	App. Date	Date Proof Submitted	System Capacity
------------	----------	--------	-----------	----------------------	-----------------

4. Permit Holder: _____

Address: _____

5. Source: _____ tributary to _____

6. Beneficial Use _____
Period of Use From _____ To _____
Rate of Diversion Q (cfs) _____
Annual Volume V (afa) _____

7. Point(s) of Diversion: _____

No.	Govt. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County
			SE	NE	14	165	29E	Polk

8. Place(s) of Use									
Twp.		Rge.		Sec.		NE 1/4			
						NE 1/4	NW 1/4	SW 1/4	SE 1/4
165	29E	14	39	40	39	40	40	40	40
165	29E	15							
158	29E								
238									
158									
Total Acres 396									

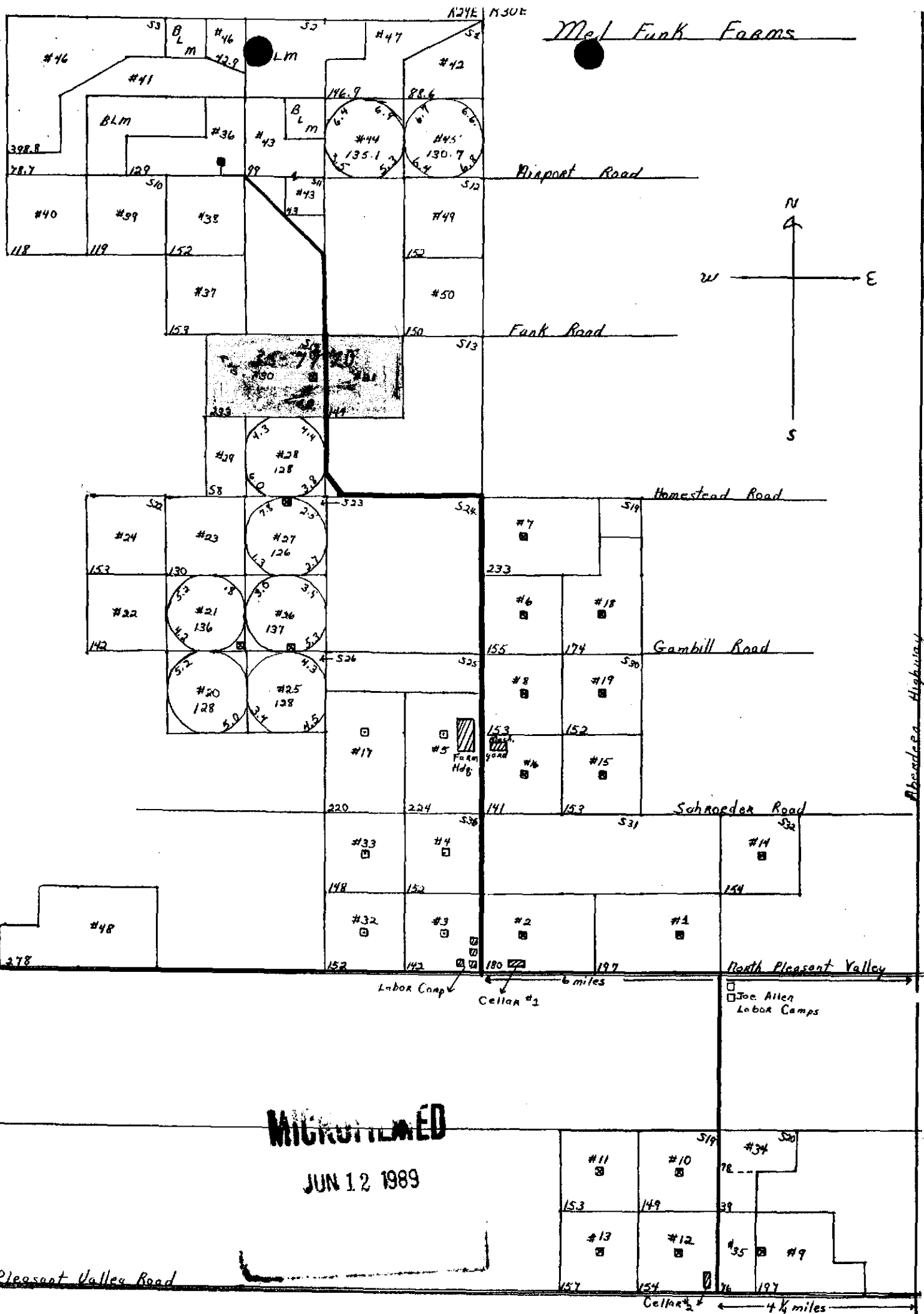
9. Recommended Conditions/Remarks: _____

10. 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 _____

11. Examiner's Signature _____
Checked in Regional Office by _____
Approved in State Office by _____
Date 8-18-87
Date 12/27/88
Date 10/1

MICROFILMED
JUN 12 1989

Mel Funk Farms



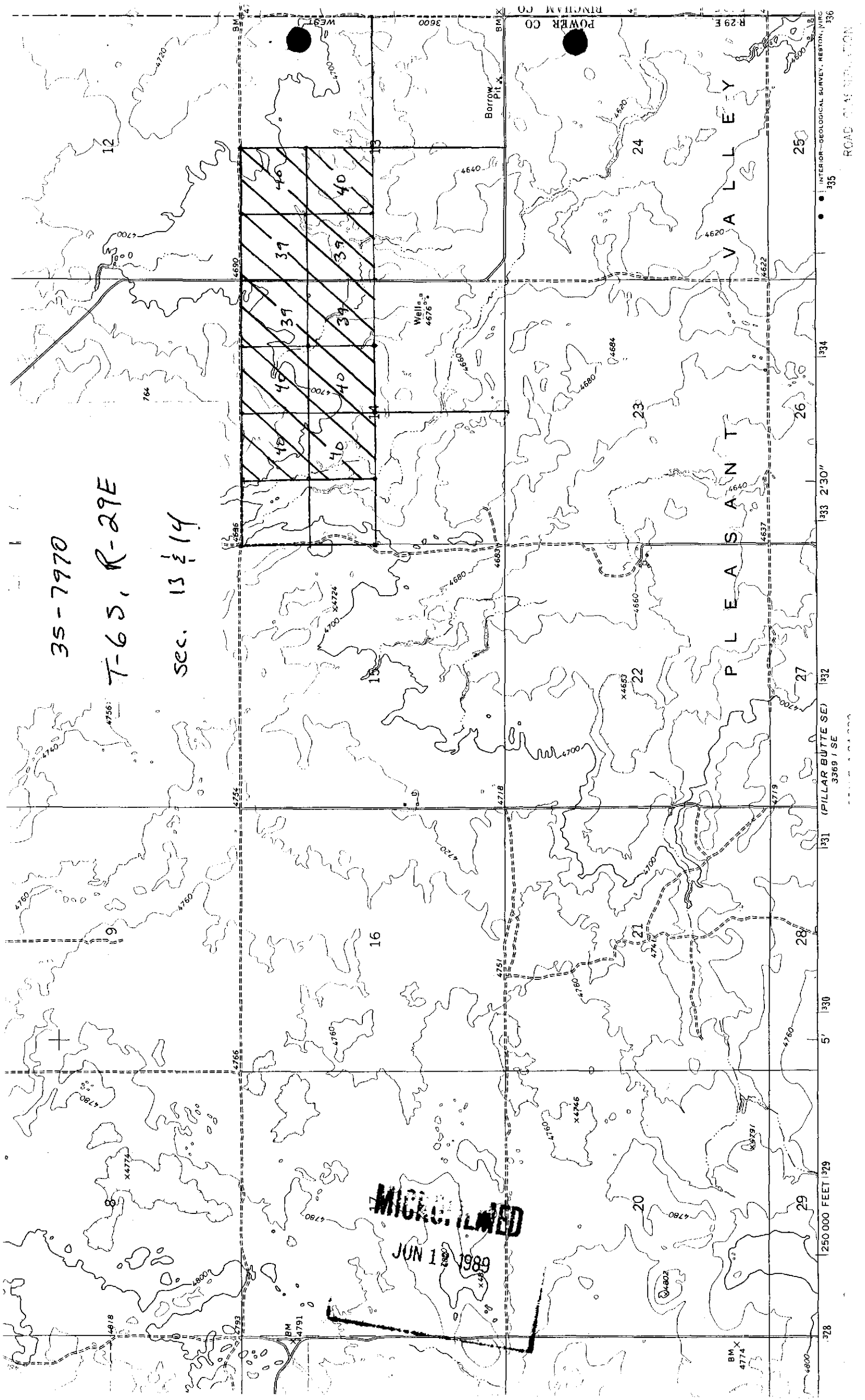
35-7970

T-65, R-29E

sec. 13 & 14

MICROFILMED

JUN 12 1989



WELL DRILLER'S REPORT

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 Mel Funk #2
Address American Falls Idaho
Owner's Permit No. 35 7970

7. WATER LEVEL

Static water level 353
953 feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ °F. Quality _____

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe method of abandoning) _____

8. WELL TEST DATA

☐ Pump ☐ Bailer ☐ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped

3. PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

4. METHOD DRILLED

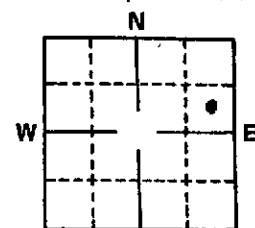
☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☒ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____
Thickness Diameter From To
250 inches 20" inches + 1 feet 19 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feetWas casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☒ Yes ☐ No
Perforated? ☐ Yes ☒ No
How perforated? ☐ Factory ☐ Knife ☐ Torch
Size of perforation _____ inches by _____ inches
Number From To
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feetWell 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 19' Material used in seal: ☒ Cement grout
☒ Puddling clay ☒ Well cuttings
Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing
☒ Overbore to seal depth
Method of joining casing: ☐ Threaded ☐ Welded ☐ Solvent
Weld
☐ Cemented between strataDescribe access port 18" of 2" pipe welded & angle

6. LOCATION OF WELL

Sketch map location must agree with written location.

County Power
Subdivision Name _____
Lot No. _____ Block 14 T. 6 N. S. R. 29 E. W.

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name Stresser Drilling Co Firm No. 95Address P.O. 166 American Falls Date 2/20/82Signed by (Firm Official) Wm Tammelff Mgrand
(Operator) Wm Tammelff

4/86

RECEIVED
JUN 16 1986

Department of Water Resources
Eastern District Office

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

EXAMINATION FEE INFORMATION

OK
G.S.
For Office Use Only
Fee Received 225.00
Date 6-16-86
Receipt # 39743
Receipt by MD
Sent to S.O. 7-16-86

RECEIVED

JUL 22 1986

1. Permit No. 35-7970

ONE OF THE FOLLOWING BOXES SHOULD BE MARKED TO DESIGNATE YOUR CHOICE: Department of Water Resources

☒ I choose to have the department make the field examination of this permit; attached is the examination fee. (If this box is marked, complete items 1 thru 8.)

2. Permit Holder: Melvin R. Funk (8 Travelers Ins.)

3. Post Office Address: Rt. 1 Box 142, American Falls, ID 83211

Telephone No. (208) 226-5207

4. Source of Water: Groundwater

5. Extent of Use:

Domestic _____ (No. of households) Stockwater _____ (No. and type of stock)

Irrigation 400 (acres) Other/Remark _____

6. Total rate &/or volume for which proof is submitted 8.00 cfs _____ acre-feet

7. Show the date water was first diverted and beneficially used under this permit:

3/23/81

8. Person to contact to accompany the department representative during the field examination:

Melvin R. Funk

(Name)

Rt. 1 Box 142, American Falls, ID 83211 (208) 226-5207

(Address)

(Telephone Number)

☐ I choose to have the field examination conducted by a certified water right examiner. Attached is statement from the certified examiner I have selected verifying that I have retained to conduct the examination. (If this box is marked, complete items 1 thru 7.)

May 16, 1986
Date

Melvin R. Funk, Owner
Signature of Permit Holder (and title, if appropriate)

copy returned for file

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
COMMENCEMENT OF WORKS

RECEIVED

MAR 8 1983

Permit No. 35-7970

Name(s) of Permit Holder(s): Mel Frank Meluskey Department of Water Resources
Eastern District Office

Post Office Address: RT. #1 Box 142
AMERICAN FALLS IDAHO Tel. No. 226-5207

☒ I hereby certify that construction of diversion works for the above referenced permit began on 4/83 I understand that I must continue to develop the water system with due diligence to maintain a valid permit.

☐ I hereby certify that construction of diversion 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.

3/8/83
Date

Mel Frank Meluskey
Signature of Permit Holder

PLACE
STAMP
HERE



IDAHO DEPARTMENT OF WATER RESOURCES
STATEHOUSE
BOISE, IDAHO 83720



State of Idaho

DEPARTMENT OF WATER RESOURCES

STATE OFFICE, 450 W. State Street, Boise, Idaho

JOHN V. EVANS

Governor

A. KENNETH DUNN

Director

Mailing address:
Statehouse
Boise, Idaho 83720

35-7970
FUNK, MELVIN R.
RT. 1 BOX 142
AMERICAN FALLS, ID 83211

138629

April 30, 1986

CERTIFIED MAIL

EXAMINATION FEE NOTICE

Dear Permit Holder:

Department records show that proof of beneficial use has been submitted for the above-referenced permit, but that a field examination has not yet been conducted to determine the extent of beneficial use of the water for licensing purposes.

House Bill 671 (effective April 4, 1986) enacted by the 1986 Idaho Legislature requires the payment of a fee before this department can conduct the field examination needed to issue a license confirming use of water under the permit. This letter is notification that the license examination fee is due within sixty (60) days of the date of this letter. The examination fee information sheet (enclosed) must be returned with the fee.

As an alternative to submitting the fee, the department will accept a field examination report completed by a certified water right examiner from the private sector. If you choose to have the examination done by a certified water right examiner, you need not submit the license examination fee to the department, but you must within sixty (60) days of the date of this letter return to the department, the examination fee information sheet showing appropriate information together with a statement from the certified examiner to verify that you have retained a certified examiner to conduct the field examination. If you choose this alternative, a completed field examination report must be submitted within one year of the date of this letter. You cannot later change your decision to use this alternative and submit the fee needed for the department to conduct the field examination, but you may change to another certified examiner.

Certified water right examiners are licensed engineers, geologists, or land surveyors certified by the department to conduct water right examinations. The procedure for certifying examiners results from the recently enacted HB 671 and is being developed. A listing

MICROFILMED

JUN 12 1989

of certified water right examiners will be available from this department when examiners have been certified.

If your permitted use, in fact, has already been examined by the department and you have not asked to have the examination repeated, the fee requirement is not applicable to your permit. If you believe this is the case, please contact the department.

The license examination fee is to be based on the amount of water you indicate you have developed, as listed in item 6 on the examination fee information sheet. The amount of water on which the examination fee is based can be less than the permitted amount, if less water has been diverted and beneficially used. The licensed amount of water, however, will not exceed the amount you claim on the examination fee information sheet. The enclosed license examination fee schedule shows a listing of applicable fees.

FAILURE TO SUBMIT WITHIN THE SIXTY (60) DAY PERIOD, THE FEE OR THE STATEMENT THAT A CERTIFIED EXAMINER HAS BEEN RETAINED TO MAKE THE FIELD EXAMINATION, WILL BE CAUSE TO ADVANCE THE PRIORITY OF THE PERMIT ONE DAY FOR EACH DAY THAT THE FEE SUBMITTAL IS LATE.

FAILURE TO SUBMIT THE FEE OR THE COMPLETED FIELD EXAMINATION REPORT WITHIN A YEAR WILL BE CAUSE TO CONSIDER THE PROOF OF BENEFICIAL USE TO BE INCOMPLETE AND TO LAPSE THE PERMIT.

The attached examination fee information sheet and the fee may be submitted to the following department offices.

Northern Region

Idaho Dept. of Water Resources
4055 Government Way
Coeur d'Alene, ID 83814
Phone: 765-4639

Eastern Region

Idaho Dept. of Water Resources
150 Shoup Ave., Suite 15
Idaho Falls, ID 83401
Phone: 525-7161

Southern Region

Idaho Dept. of Water Resources
1041 Blue Lakes Blvd. North
Twin Falls, ID 83301
Phone: 734-3578

Western Region

Idaho Dept. of Water Resources
450 W. State St., (Third Floor)
Boise, ID 83720
Phone: 334-2190

Sincerely,



L. GLEN SAXTON
Chief, Operations Bureau

Enclosures

RECORDED

JUN 17 1969

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
Eastern Region

150 Shoup, Suite 15
Idaho Falls, Idaho 83402
(208) 525-7161

SEPTEMBER 18, 1985

MELVIN R. FUNK
RT. 1, BOX 142
AMERICAN FALLS ID 83211

RE: Permit No. 35-7970

Dear Permit Holder:

We acknowledge receipt of your statement submitted as proof of beneficial use for the above referenced permit.

Before a license can be issued, a field examination must be made by a representative of this department.

A field examiner will contact you to arrange to examine your system.

If you have any questions regarding the field examination, please contact this office by phone at 525-7161 or in person in the third floor State Office Building, 150 Shoup, Idaho Falls, Idaho.

Sincerely,
s/HAROLD W. JONES
Sr. Resource Agent

MICROFILMED

JUN 12 1989

DEPARTMENT OF WATER RESOURCES

The Idaho Department of Water Resources will consider this card as a statement that the permit holder(s) has completed development to the extent shown below on Permit No. 35-7970.

Name(s) of Permit Holder: MELVIN R. FUNK FARMS

Post Office Address: RT. 1 BOX 142

AMERICAN FALLS, ID 83211 Tel. No. 226-5207

Source of Water: GROUNDWATER

Extent of Use: ☐ Domestic _____ (number of households)
☐ Stockwater _____ (number and type of stock)
☒ Irrigation 400 _____ (acres)
☐ Other _____

Measuring Device: Required? ☐ Yes ☒ No Installed? ☐ Yes ☐ No
Access Port: Required? ☒ Yes ☐ No Installed? ☒ Yes ☐ No

The above information is a true statement of the extent to which the above numbered permit has been developed.

5/22/85
Date

MICROFILMED

Melvin R. Funk
Signature of Permit Holder

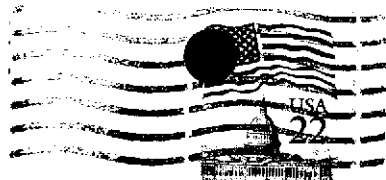
MELVIN R. FUNN

ARMS

PM

RT. 1 BOX 142

AMERICAN FALLS, ID 83211



RECEIVED

MAY 24 1985

IDAHO DEPARTMENT OF WATER RESOURCES
STATEHOUSE
BOISE, IDAHO 83720

Department of Water Resources

MICROFILMED

RECEIVED
JUL 8 1985

FORM A

STATE OF IDAHO

JUL 8 1985

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 development under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below:

Permit No. 35-7970

Name(s) of Permit Holder: MELVIN R. FUNK

Post Office Address: RT. # 1 BOX 142, AMERICAN FALLS, ID 83211

Telephone No. (208) 226-5207

Source of Water: GROUND WATER

Extent of Use: Domestic (number of households)

Stockwater	(number and type of stock)
------------	----------------------------

Irrigation	400	(acres)
------------	-----	---------

Other/Remarks

Indicate the date water was first diverted and beneficially used under this permit: 03/23/81

Measuring Device: Required? Yes No
Installed? Yes No

Flow Measurement Port:	Required?	<u>X</u>	Yes	<u> </u>	No
	Required?	<u>X</u>	Yes	<u> </u>	No

Person to contact to accompany the Department representative during field examination: MELVIN R. FUNK

(Name)

RT. # 1 BOX 142 AMERICAN FALLS, ID 83211

(Address)

(208) 226-5207

(Telephone number)

The above information is a true statement of the extent to which the above numbered permit has been developed.

04/22/85

Date _____

Signature of Permit

(and Title, if appropriate)

MICROFILMED

duplicate-
see proof
rec'd 5/24/85
kw

Permit No. 35-7970

ASSIGNMENT REVIEW CHECK LIST

1. Signature of Permit Holder? ☒
2. Notary? ☒
3. ☒ a. Full Assign?
b. Partial Assign?
4. "No assignment" condition on permit? no
5. Commencement of works received? yes -
6. Affidavit of Residency required? no

1. Type Permit Summary sheet ☒
2. Coding sheet ☒
3. Acknowledgement letter type - none per letter of 8/31/84
4. Copy to region ☒

Date: 9-5-84

Employee: kw

RECEIVED
JAN 12 1985



The Travelers Companies
4 Orinda Way
Suite 200A
Orinda, CA 94563
415 254-8802
800 468-9011

SEP 4 1984

Department of Water Resources

Real Estate Investment
Western Region

August 31, 1984

Department of Water Resources
State Capital
Boise, Idaho 83720

Re: Loan No.: 501972-4
Name: Melvin R. Funk
Permit Nos.: 35-7964, 35-7965, and 35-7970

Gentlemen:

Enclosed please find Assignments which we hold in connection with our real estate loan on the property serviced by the permits indicated above. We hope to have the permits developed into licenses at the earliest possible date.

Would you please file these Assignments so that the permits may not be transferred.

Please acknowledge your receipt hereof by signing and returning a copy of this letter at your earliest convenience.

Sincerely,

THE TRAVELERS INSURANCE COMPANY

Catherine O'Keefe
Legal Specialist

CO/hjl*
enclosure

done
9/5/84 -
kw

RECEIVED

Catherine A. O'Keefe
Legal Specialist
Real Estate Investment



The Travelers Companies
4 Orinda Way, Suite 200A
Orinda, CA 94563
415 254-8802

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

STATEHOUSE
BOISE, IDAHO 83720
(208) 334-4440

FUNK, MELVIN R.
RT. 1 BOX 142
AMERICAN FALLS, ID 83211

JUNE 03, 1981

RE: PERMIT NO. 35-7970

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.

BE SURE TO NOTE THE SPECIAL CONDITION REQUIRING YOU TO INSTALL A MEASURING DEVICE, OR AN ACCESS PORT TO PROVIDE FOR THE INSTALLATION OF MEASURING EQUIPMENT BY THE DEPARTMENT. ENCLOSED PLEASE FIND A LIST OF MEASURING DEVICE OPTIONS, AND SPECIFICATIONS FOR THE INSTALLATION OF THE ACCESS PORT.

WE HAVE ENCLOSED A FORM ENTITLED "MAKING PROOF OF BENEFICIAL USE". PLEASE READ THE INSTRUCTIONS CAREFULLY SINCE YOU MUST TAKE FURTHER ACTION TO DEVELOP THIS PERMIT INTO A LICENSE.

SINCERELY,

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

ENCLOSURE

CENTRAL

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: KCW Wilson

APPLICATION NUMBER: 35 7970
Melvin R Fank
35-7970

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: _____

Needs Source
Pump # 34 field 34725

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: April 20 ✓
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: April 14, 1981 ✓
☒ 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? _____
March 23, 1981 ✓ Date of priority recommended.
Special conditions of approval or cover letter. _____

By: Ernest Carlson Date: April 22, 1981

STATE OFFICE REVIEW:

SL 103 OK

☐ See attached sheet for more information.
By: Relip Date: 5/6/81

35-2920_

FUNK, MELVIN R.

RT. 1 BOX 142. AMERICAN FALLS, ID 83211

Source: GROUNDWATER

Date Filed: 03/23/1981

Amount: 8.00 CFS

Diversion Point: SENE Sec 14 T 06S R 29E. POWER Co.

Use: IRRIGATION (8.00 CFS) from 04/01 to 11/01

Place of Use: NENW NWNW SWNW SENW Sec 13 T 06S R 29E NENE NWNE SWNE SENE NENW
SENE Sec 14 T 06S R 29E FOR 400 ACRES

Diversion Means: WELL, PUMP & SPRINKLERS.

MICROFILMED