

Drilling Permit No. 826181
Drilling Permit I.D. Tag No. 1200 34145
Water Right Permit No. _____
Injection Permit No. _____

RECEIVED

NOV 17 2004

Department of Water Resources
Southern Region

State of Idaho
Department of Water Resources

App 886163
ID 396808

APPLICATION FOR DRILLING PERMIT
(FOR THE CONSTRUCTION OF A WELL)

1. Owner (please print): Southern Idaho Solid Waste
2. Mailing Address: P.O. Box 159
City Burley State ID Zip Code 83316 Telephone 208-432-9082
3. Proposed Well Location: Twp. 2S Rge. 17E Sec. 11 1/4 SE 1/4 NW
Gov't Lot No. _____ County Cameo Lat. _____ Long. _____
Street Address of Well Site West Magic Rd. 1/2 mile off Hwy 75 City Shoshone
Give at least name of road + Distance to Road or Landmark
Lot, block and subdivision _____

4. Proposed Use of Well:

- ☐ DOMESTIC: The use of water for homes, organization camps, public campgrounds, livestock (1,000 head or less) and any other purpose in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in excess of 13 gpd; or any other uses, if the total use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

Domestic does not include water for multiple ownership subdivisions, mobile home parks, commercial or business establishments, unless the use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

NON-DOMESTIC: ☐ Irrigation ☐ Municipal ☐ Industrial
☐ Stock ☐ Test ☒ Other Wastewater Station
(Over 1,000 Head) (Describe)

☐ INJECTION

- ☐ MONITORING: A well bore schematic and map is required for each blanket permit.
No. of proposed wells: _____

5. Well Construction Information:

- A. ☒ New well ☐ Modify ☐ Replace
- B. Proposed Casing Diameter 6" Proposed Maximum Depth 250
- C. Anticipated bottom hole temperature:
☒ 85°F or less ☐ 85°F to 212°F ☐ 212°F or more
(Cold Water Well) (Low Temp. Geo. Well) (Geothermal Well)

6. Construction Start Date: 11/18/04
7. Anticipated Well Driller: Walker Water Systems Inc Driller's Lic. No. 15
NOTE: The actual well driller must be identified prior to drilling.
8. Applicant's Signature: Frank R. Walk Date 11/17/04

Address (if different than owner): _____
City _____ State _____ Zip Code _____ Telephone _____
Title: Frank R. Walk
(Owner, Firm Representative, Other)

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