

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

The map is drawn on a grid. A rectangle is outlined in blue, spanning from the 3rd vertical line to the 13th vertical line and from the 5th horizontal line to the 15th horizontal line. The label 'T 45' is written in blue ink to the left of the rectangle. The label 'R 5E' is written in blue ink below the rectangle. An 'X' is drawn at the intersection of the 12th vertical line and the 11th horizontal line, with the word 'well' written next to it.

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.

*William Drumhise*  
(Applicant)

Chairman of the Board of Directors  
of Silver Sage Mobile Home Estates

45

5E

x y

(Include distance from pump to measuring device, if applicable.)



Point(s) of diversion: NE SE S9 45 SE

Place(s) of Use

[illegible]

☐ Change P.D. as reflected above

☐ Change P.U. as reflected above

☐ Add P.D. as reflected above

☐ Add P.U. as reflected above

☒ None

☒ Other

Checked by

Approved by \_\_\_\_\_

Date 10 July 1981

Date 4/24/82

Date 4/24/82

State of Idaho  
Department of Water Resources

WATER RIGHT LICENSE

License of Water Right No. 61-7394 Priority December 13, 1979 Amount 0.16 cfs

THIS IS TO CERTIFY, that Silver Sage Water Corp.  
of Grandview, Idaho, has complied with the terms and conditions of Permit  
No 61-7394 issued pursuant to Application for Permit dated December 13, 1979,  
and has submitted proof to the Department of Water Resources on December 12, 1980,  
that he has applied water to a beneficial use, an examination by the Department indicates that the works have a  
capacity for the diversion of 0.16 cfs of water from a groundwater source,  
tributary to \_\_\_\_\_, and that the permit holder has applied to a beneficial use and  
established a right to use water as follows:

| Beneficial Use      | Period of Use                 | Rate of Diversion | Annual Volume      |
|---------------------|-------------------------------|-------------------|--------------------|
| Domestic (20 units) | from January 1 to December 31 | at 0.16 cfs       | and 24.0 acre feet |
|                     | from _____                    | _____ cfs         | and _____          |
|                     | from _____                    | _____ cfs         | and _____          |

Subject, however, to the condition that no more than 0.16 cfs of water be diverted at any one time, and  
that the amount of water so diverted and to which such right is entitled and confirmed is for the purpose  
aforementioned and is limited to the amount which can actually be beneficially used and shall not exceed  
24.0 acre feet per year, said waters to be diverted within the NE $\frac{1}{4}$ SE $\frac{1}{4}$ , Section 9, Twp.  
4S, Rge. 5E in the County of Elmore

Description and location of place of use:

| Twp. | Range | Section | NEAT WATER SOURCES |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | Totals |
|------|-------|---------|--------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--------|
|      |       |         | NE $\frac{1}{4}$   | NW $\frac{1}{4}$ | SW $\frac{1}{4}$ | SE $\frac{1}{4}$ | NE $\frac{1}{4}$ | NW $\frac{1}{4}$ | SW $\frac{1}{4}$ | SE $\frac{1}{4}$ | NE $\frac{1}{4}$ | NW $\frac{1}{4}$ | SW $\frac{1}{4}$ | SE $\frac{1}{4}$ | NE $\frac{1}{4}$ | NW $\frac{1}{4}$ | SW $\frac{1}{4}$ | SE $\frac{1}{4}$ |        |
| 4S   | 5E    | 9       |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |
|      |       |         |                    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |

Total number of acres irrigated \_\_\_\_\_

NOTE: 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 right may be forfeited by five years of non-use.

The right to the use of the water hereby confirmed is restricted and appurtenant to the lands or place of use hereinafter described, as provided by the laws of Idaho.

Witness the seal and signature of the Director, affixed at Boise, Idaho, this 28 day of  
June, 19 82.

Director

JS DWT

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

APPROVED

1. Name of applicant Silver Sage Water Corp. Phone 832-7612

Post office address Star Rt. B-Box 457, Grandview, Idaho 83624

2. Source of water supply ground water which is a tributary of \_\_\_\_\_

3. Location of point of diversion is NE  $\frac{1}{4}$  of SE  $\frac{1}{4}$  of Section 9 Township 4S

Range 5E m B.M. Elmore County, additional points of diversion if any: \_\_\_\_\_

4. Water will be used for the following purposes:

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)

Amount .40 for domestic purposes from 1 Jan. to 31 Dec. (both dates inclusive)  
(cfs or acre-feet per annum)

5. Total quantity to be appropriated:

a. .40 cubic feet per second and/or b. \_\_\_\_\_ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. Domestic well, 1-10 Hp. Sub. pump

b. Height of storage dam N/A feet, active reservoir capacity 320 gals.  
~~acre-feet~~; total reservoir capacity N/A acre-feet, materials used in storage dam: N/A

Period of year when water will be diverted to storage 365 days to 1 Jan-31 Dec inclusive.  
(Month/Day) (Month/Day)

c. Proposed well diameter is 8" inches; proposed depth of well is 500 feet.

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 - maximum 5 years).

8. Description of proposed uses:

a. If water is not for irrigation:

(1) Give the place of use of water: NE  $\frac{1}{4}$  of NE $\frac{1}{4}$ SE  $\frac{1}{4}$  of Section 9 Township 4S

Range 5E B.M.

(2) Amount of power to be generated: 2 N/A horsepower under N/A feet of head.

(3) List number of each kind of livestock to be watered None N/A

(4) Name of municipality to be served Kennedy Mobile Home Park, or number of families to be supplied with domestic water 20.

(5) If water is to be used for other purposes describe: Use for domestic purposes for 20 families and lawns and gardens.

DEC 19 1979

DEC 13 1979

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b. If water is for irrigation, indicate acreage in each subdivision in the tabulation below:

| TWP | RANGE | SEC. | NE¼ |     |     |     | NW¼ |     |     |     | SW¼ |     |     |     | SE¼ |     |     |     | TOTALS |
|-----|-------|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------|
|     |       |      | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ | NE¼ | NW¼ | SW¼ | SE¼ |        |
| 4S  | 5E    | 9    |     |     |     |     |     |     |     |     |     |     |     |     | X   |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |

Total number of acres to be irrigated \_\_\_\_\_

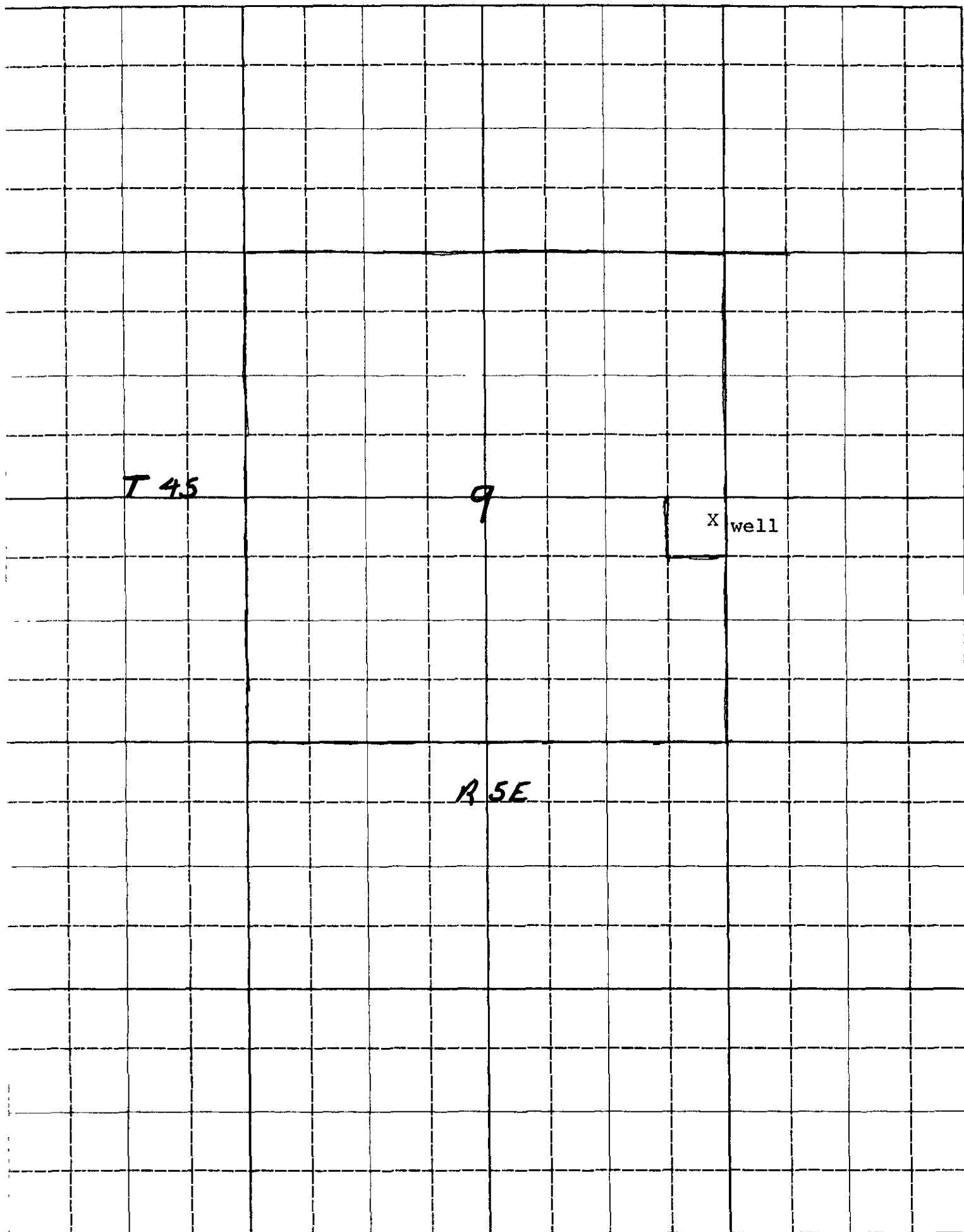
c. Describe any other water rights used for the same purposes as described above. None  
lawns and gardens in subdivision

9. a. Who owns the property at the point of diversion Silver Sage Mobile Home Estates  
b. Who owns the land to be irrigated or place of use all members of the above subdivision  
c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing Chairman of the Board of Directors of the  
Silver Sage Mobile Home Estates

10. Remarks \_\_\_\_\_

The well in question was drilled by Ferrel H. Bradbury on  
approximately the 12th of October, 197<sup>2</sup><sub>4</sub>, within the subdivision  
platted as Silver Sage Mobile Home Estates. The well has an  
8 inch hole with the pipe leading to the shaft pipe of approximately  
6 inches in diameter, leading to a submersible 10 horsepower  
motor and pump, pumping water through a 3 inch discharge pipe.  
Pumping domestic water for domestic purposes, lawns and gardens,  
and is then discharged into 4 80 gallon tanks and then is dis-  
charged throughout the subdivision for purposes aforesaid.

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.

*William J. Smith*  
(Applicant)

Chairman of the Board of Directors  
of Silver Sage Mobile Home Estates

Proposed Priority 12/13/79  
Received by nr Date 12-19-79 Time 11:00 am  
Date 12-13-79 Time 1:00 pm  
Preliminary check by \_\_\_\_\_ Fee \$ 35.00 #15276  
Received by KK Date 12/19/79  
Publication prepared by KK Date 12/20/79  
Published in Mtn. Nome News  
Publication dates 12/27 & 1/3/80  
Publication approved KK Date 1/14/80  
Protests filed by: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Copies of protests forwarded by \_\_\_\_\_  
Hearing held by \_\_\_\_\_ Date \_\_\_\_\_  
Recommended for approval denial by DBS gim

**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. 61-7394, 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 February 1, 19 81.
- c. The rate of diversion, if water is to be used for irrigation under this permit, when combined with all other water rights for the same land shall not exceed 0.02 cubic feet per second for each acre of land.
- d. Other: (1) The issuance of this permit in no way grants any right-of-way or easement across the land of another.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Witness my hand this 24<sup>th</sup> day of January, 19 80.

J. Glen Saylor  
Chief, Operations Bureau

NOTICE OF APPLICATIONS  
FOR WATER RIGHTS

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

61-7393

MC GREW, WM H. &/or HELEN BRANDT

BOX 583, GLENN'S FERRY, ID 83623

Source COLD SPRINGS CREEK tributary to SNAKE RIVER

Date Filed 12/10/1979

Amount 40 00 CFS 4500 0 AC-FT

Diversion Point: SENW Sec 35 T 03S R 09E, ELMORE Co

Use: IRRIGATION STORAGE (4500 0 AC-FT) from 11/01 to 03/31, DIVERSION TO STORAGE (40 00 CFS) from 11/01 to 03/31, IRRIGATION FROM STORAGE (4500 0 AC-FT) from 04/01 to 10/31

Place of Use NWSW SWSW Sec 35 T 03S R 09E NWNW SWNW NWSW Sec 02 T 04S R 09E NENE SWNE SENE SENW NPSW SESW NESE NWSE SWSE SESE Sec 03 T 04S R 09E NWNE SWNE NESW NWSW SWSW SESW NWSE SWSE SESE Sec 08 T 04S R 09E NENE SWNE SENE SWSW SESW NESE NWSE SWSE SESE Sec 09 T 04S R 09E NENE NWNE SWNE NENW NWNW SWNW SENW NESW NWSW SWSW SESW NWSE SWSE Sec 10 T 04S R 09E NENW NWNW SWNW Sec 15 T 04S R 09E NENE NWNE SWNE SENE NENW SWNW SENW NWSE Sec 16 T 04S R 09E NENE NWNE NENW NWNW Sec 17 T 04S R 09E NENE SENE NESE NWSE SWSE Sec 29 T 04S R 09E FOR 2640 ACRES

Diversion Means: 7 STORAGE DAMS W/FEEDER CANAL; PUMP & SPRINKLER SYSTEM

61-7394

SILVER SAGE WATER CORP  
P.O. BOX 457, STAR RT. B, GRAND VIEW, ID 83624

Source GROUNDWATER

Date Filed: 12/13/1979

Amount 0 40 CFS

Diversion Point NESE Sec 09 T 04S R 05E, ELMORE Co

Use: DOMESTIC (0 40 CFS) from 01/01 to 12/31

Place of Use NESE Sec 09 T 04S R 05E

Diversion Means WELL & PUMP

If issued, the permits will be subject 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, 92 S. Cole Road, Boise, Idaho 83709 on or before JANUARY 14, 1980.

C. STEPHEN ALLRED

Director

Published 12/27 & 1/3/80.

Affidavit of Publication

County of Elmore }  
STATE OF IDAHO } ss.

I, Joseph S. Waters do solemnly swear that I am the foreman, or publisher of the

MOUNTAIN HOME NEWS

a weekly newspaper of general circulation, published once a week at MOUNTAIN HOME, IDAHO, that the notice attached hereto and which is a part of the proof of publication thereof, was published in said newspaper for

2..... consecutive weeks, the first publica-

tion having been made on the 27.... day

of December....., 1979, and

the last publication having been made on the

3..... day of January.....

1980....; every Thursday issue of the paper

during the period and time of publication and that the notice was published in the newspaper proper and not in a supplement thereof.

And I further swear that the said MOUNTAIN HOME NEWS has been continuously and uninterruptedly published in said Elmore County during a period of 78 consecutive weeks prior to the first publication of the attached notice.

Joseph S. Waters.....

Subscribed and sworn to me this 3.....

day of Jan....., 1980.

Joseph S. Waters  
Notary Public

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JAN 7 1980

Department of Water Resources  
Western Regional Office

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IDAHO DEPARTMENT OF WATER RESOURCES  
WELL DRILLER'S REPORT

Office Use Only  
Inspected by \_\_\_\_\_  
Twp \_\_\_\_\_ Rge \_\_\_\_\_ Sec \_\_\_\_\_  
1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Lat \_\_\_\_\_ Long \_\_\_\_\_

1. DRILLING PERMIT NO. 61 -98 -W -0060 -200Other IDWR No D00075472. OWNER WR 61-02394Name SILVER SAGE WATER CORPAddress P O BOX 115City MTN HOME State ID Zip 83647

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location

N

|   |   |   |   |              |                                                                             |              |                                                                           |               |     |        |        |         |          |           |
|---|---|---|---|--------------|-----------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------|---------------|-----|--------|--------|---------|----------|-----------|
| W | E | S | N | Twp <u>4</u> | North <input type="checkbox"/> or South <input checked="" type="checkbox"/> | Rge <u>5</u> | East <input checked="" type="checkbox"/> or West <input type="checkbox"/> | Sec. <u>9</u> | 1/4 | NE 1/4 | SE 1/4 | T acres | 40 acres | 160 acres |
|   |   |   |   |              |                                                                             |              |                                                                           |               |     |        |        |         |          |           |

Gov't lot \_\_\_\_\_ County ELMORE

Lat \_\_\_\_\_ Long \_\_\_\_\_

Address of Well Site AIRBASE & GRANDVIEW RDINTERSECTION City MTN HOME AFB

(Give at least name of road + Distance to Road or Landmark)

Lt. \_\_\_\_\_ Blk. \_\_\_\_\_ Sub. Name \_\_\_\_\_

## 4. USE:

Domestic ☐ Municipal ☐ Monitor ☐ Irrigation ☐  
☐ Thermal ☐ Injection ☒ Other SUBDIVISION

5. TYPE OF WORK check all that apply (Replacement etc )

New Well ☐ Modify ☐ Abandonment ☒ Other REPLACEMENT

## 6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other \_\_\_\_\_

## 7. SEALING PROCEDURES

| SEAL/FILTER PACK |      | AMOUNT |                 | METHOD   |
|------------------|------|--------|-----------------|----------|
| Material         | From | To     | Sacks or Pounds |          |
| BENTONITE        | 0    | 60     | 2500 lbs        | OVERBORE |
|                  |      |        |                 |          |
|                  |      |        |                 |          |

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) \_\_\_\_\_Was drive shoe seal tested? ☐ Y ☒ N How? \_\_\_\_\_

## 8. CASING/LINER:

| Diameter | From | To | Gauge | Material | Casing                              | Liner                    | Welded                              | Threaded                 |
|----------|------|----|-------|----------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 8.625    | +2   | 60 | 322   | STEEL    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|          |      |    |       |          | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
|          |      |    |       |          | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_

## 9. PERFORATIONS/SCREENS

☐ Perforations Method \_\_\_\_\_☐ Screens Screen Type \_\_\_\_\_

| From | To | Slot Size | Number | Diameter | Material | Casing                   | Liner                    |
|------|----|-----------|--------|----------|----------|--------------------------|--------------------------|
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |

## 10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

412 ft below ground

Artesian Pressure \_\_\_\_\_ lb

Depth flow encountered \_\_\_\_\_  
devices \_\_\_\_\_

Describe access port or control

## 11. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

| Yield gal/min | Drawdown | Pumping Level | Time |
|---------------|----------|---------------|------|
| 80            | 0        | 412           | 2 HR |
|               |          |               |      |
|               |          |               |      |

Water Temp \_\_\_\_\_ Bottom hole temp \_\_\_\_\_

Water Quality test or comments: \_\_\_\_\_

Depth first Water Encountered \_\_\_\_\_

## 12. LITHOLOGIC LOG: (Describe repairs or abandonment)

| Water                                                  |      |     |                                           | Y                                   | N                        |
|--------------------------------------------------------|------|-----|-------------------------------------------|-------------------------------------|--------------------------|
| Bore Dia                                               | From | To  | Remarks: Lithology, Water Quality & Temp. |                                     |                          |
| 12                                                     | 0    | 2   | TOPSOIL                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12                                                     | 2    | 8   | CLEACH                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12                                                     | 8    | 27  | GRAY LAVA                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12                                                     | 27   | 29  | BROWN CINDERS                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12                                                     | 29   | 66  | GRAY LAVA                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12                                                     | 66   | 68  | BROWN CINDERS                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 68   | 88  | GRAY LAVA                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 88   | 97  | LOST CIRCULATION-BROKEN UP, SOFT          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 97   | 101 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 101  | 103 | SOFT                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 103  | 134 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 134  | 136 | SOFT                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 136  | 157 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 157  | 159 | SOFT-BROKENUP                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 159  | 181 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 181  | 182 | SOFT                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 182  | 204 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 204  | 222 | HARD                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 222  | 245 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 245  | 251 | BROKEN UP SOFT                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 251  | 257 | HARD                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 257  | 261 | SOFT                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 261  | 301 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 301  | 306 | SOFT                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 306  | 312 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 312  | 325 | HARD                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 325  | 330 | SOFT BROKEN UP                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 330  | 343 | MEDIUM                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8                                                      | 343  | 357 | SOFT                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|                                                        |      |     | PAGE 1 OF 2                               |                                     |                          |
| Completed Depth <u>558</u> (Measurable)                |      |     |                                           |                                     |                          |
| Date Started <u>10-12-98</u> Completed <u>10-19-98</u> |      |     |                                           |                                     |                          |

## 13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed

Firm Name Hiddleston & Son, IncFirm No 35Firm Official RoryDate 10-20-98Supervisor or Operator Timothy D. HarrisonDate 10-13-98

(Sign once if Firm Official &amp; Operator)

MICROFILMED

MAR 15 1999



WATER RIGHT NUMBER 61-7394✓

OWNER LAST NAME - SILVER SAGE WATER CORP.✓

FIRST NAME - ORIG OWNER -

ADDRESS LINE 1 - 3730 S. 132 W. BRADDOCK RD.✓

ADDRESS LINE 2 - SPACE X✓

ADDRESS LINE 3 -

CITY - MOUNTAIN HOME✓

STATE - ID ZIP CODE - 83647✓

**VERIFIED GIS**

SOURCE - GROUNDWATER✓

IRRIUTARY OF -

STAGE - LICENSE✓

STATUS -

PRIORITY - 12-13-1979✓

COUNTY - ELMO✓

TOTAL DIV. RATE -

.1600✓-CFS

TOTAL DIV. VOLUME -

24.00 AFA✓

TFR/AMEND -

WATER DIST. -

DLF/CAPEY ACT -

RIGHT BASIS -

0.0

0.0

0.0

DIVERSION POINT -

NFS✓04'04S'05W'10T

FEDIV -

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

0.0

FROM - 01-01-70 - 12-31✓

USE - DOMESTIC

PLACE OF USE -

TWN 04S R4G 05E

SEC 09✓

TRACT N5E EUT

AC

DATE -

TOTAL ACRES

0

0

0

0

0

0

0

0

0

0

0

DEGREE NAME -

REMARKS -

NON IRRIG USE -

OTHER RIGHTS FOR SAME USE -

PROOF DUE -

PROOF MADE -

DIVERSION MEANS -

WELL &amp; PUMP

PROTESTED -

HEARING -

OLD NO. -

**VERIFIED GIS**Verified Data  
12/31/87

July 15, 1982

RE: Permit No. 61-7394

Silver Sage Water Corp.  
3730 S. 122 Bradbury Rd., Space "X"  
Mountain Home, ID 83647

Gentlemen:

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

Sincerely,

A handwritten signature in cursive script, appearing to read "Jim Johnson".

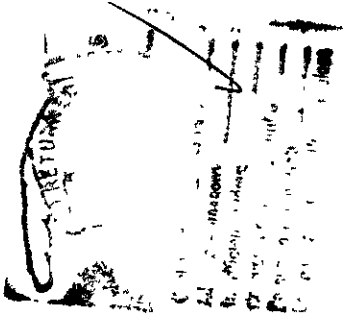
JIM JOHNSON  
Water Distribution Supervisor

JJ:kw  
Enclosure

MICROFILMED

MAR 15 1999

DEPARTMENT OF WATER RESOURCES  
STATEHOUSE  
BOISE, IDAHO 83720



RECEIVED

JUL 8 1982

Department of Water Resources

~~Silver Sage Water Corp.  
Star Route 8, Box 457  
Grandview, ID 83624~~

MICROFILMED

MAR 1 1995

July 6, 1982

RE: Permit No. 61-7394

Silver Sage Water Corp.  
Star Route B, Box 457  
Grandview, ID 83624

Gentlemen:

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

Sincerely,



JIM JOHNSON  
Water Distribution Supervisor

JJ:kw  
Enclosure

**MICROFILMED**



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  
(208) 334-4440

May 12, 1982

RE: Permit No. 61-7394

Silver Sage Water Corp.  
Star Route B, Box 457  
Grandview, ID 83624

Gentlemen:

A representative of this Department has made an examination of the works covered by your Permit No. 61-7394, and has found the following:

Amount of water that can be recognized as beneficially used under  
Idaho law: 0.16 cfs Source: groundwater

The maximum quantity diverted shall not exceed 24.0 acre feet  
per year.

Point(s) of diversion: NE $\frac{1}{4}$ SE $\frac{1}{4}$ , Sec. 9, Twp. 4S, Rge. 5E, Elmore County

Beneficial use: Domestic use for 20 units within the NE $\frac{1}{4}$ SE $\frac{1}{4}$ , Sec. 9,  
Twp. 4S, Rge. 5E

Priority date established: December 13, 1979

Conditions (if any):

If you do not concur with these findings please contact us within 10 days, otherwise a water license will be issued as set forth above.

Sincerely,

JOHNSON

Water Distribution Supervisor

J:kw

MICROFILMED

## Permit No.

John 5-17-82

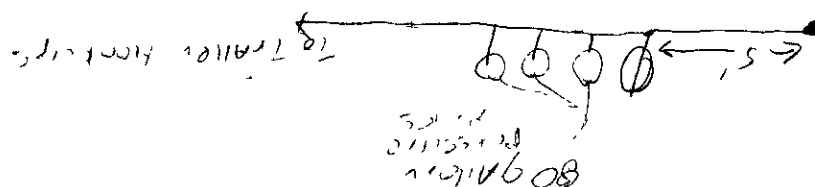
68-17

100

☐ Add P.D. as reflected above

**MICROFILMED**

Point(s) of diversion: NK SE 39 415 37

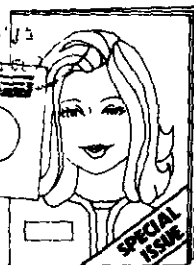
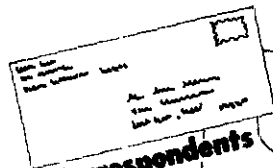


## SCHEMATIC DIAGRAM OF SYSTEM

[illegible]

MAP (Attach Aerial Photo)

**Change of Address card for:**



Department of Water Resources  
Western Regional Office

Name Dept. of Water Resources (Western Region)

Address 92 South Cole Road

City Boise State Idaho ZIP 83709

PS Form 3576  
May 1978

**As soon as you know your new address,  
mail this card to all the people, businesses,  
and publishers who send you mail.**

61-

For publishers, paste old label over name and old address sections and complete new address section

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|                    |                                                                                                                |                                                                    |
|--------------------|----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <b>Your Name</b>   | Print or Type-Last Name, First Name, Middle Initial<br><b>Silver Sage Water Corp.</b>                          | New Area Code and Telephone No. if known<br><b>832-7516 (same)</b> |
| <b>Old Address</b> | No. and Street, Apt., Suite, P.O. Box or R.D. No.<br><b>Star Rt. B- Box 457</b>                                |                                                                    |
|                    | City, State and ZIP Code<br><b>Grand View, Idaho 83624</b>                                                     |                                                                    |
| <b>New Address</b> | No. and Street, Apt., Suite, P.O. Box or R.D. No. (In care of)<br><b>3730 S. 132 W. Bradbury Rd. Space "X"</b> |                                                                    |
|                    | City, State and ZIP Code<br><b>Mtn. Home, Idaho 83647</b>                                                      |                                                                    |
| <b>Sign Here</b>   | <i>Paul J. Villa</i>                                                                                           | Date new address in effect<br><b>CURRENT</b>                       |
|                    |                                                                                                                | <b>PERMIT NO. 61-7394</b>                                          |

Receiver Be sure to record the above new address in your address book at home or office

*Secretary - Meas.*

Star Rt B, Box 457  
Grandview, ID 83624

Star Rt B, Box 457  
Grandview, ID 83624

Star Rt B, Box 457  
Grandview, ID 83624



Richardson #181 8850 Leamy Church Boston  
Architecture USA15c



IDAHO DEPARTMENT OF WATER RESOURCES  
STATEHOUSE  
BOISE, IDAHO 83720

# 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 of Permit No. 61-7324

Name(s) of Permit Holder: Silver Sage water Corp.

Post Office Address. Star Rt. B-Box 457, Grandview, ID.

83624

Tel. No. \_\_\_\_\_

Source of Water: Domestic well installed and operation in October 1972. Ground Water.

Extent of Use

☒ Domestic

20

(number of households)

☐ Stockwater

(number and type of stock)

☐ Irrigation

(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.

12/8/80  
Date

*Chairman*

*William E. Morris*  
Signature of Permit Holder



State of Idaho

## DEPARTMENT OF WATER RESOURCES

WESTERN REGION, 92 South Cole Road, Boise, Idaho 83709

JOHN V. EVANS

Governor

(Office at the corner of  
Franklin and Cole Roads)

C. STEPHEN ALLRED

Director

(208) 384-2190

January 22, 1961

Silver Sage Water Corporation  
Star Route B - Box 457  
Grandview, Idaho 83624

RE: Permit No. 61-7394

Dear Sir:

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 examination of your system has been scheduled for

\_\_\_\_\_  
If this time and date is not convenient for you, please contact this office as soon as possible.

☒ 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.

Sincerely,

Kay Walker  
Secretary

RECEIVED

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES

-----

STATEHOUSE  
BOISE, IDAHO 83720  
(208) 334-4440  
CERTIFIED MAIL

SILVER SAGE WATER CORP.  
P.O. BOX 457, STAR RT. 8  
GRANDVIEW, ID 83624

1986.0

NOVEMBER 30, 1980

DEAR PERMIT HOLDER:

ONE OF THE CONDITIONS OF APPROVAL OF YOUR WATER PERMIT NO. 61-7394 WAS THAT EVIDENCE OF THE EXTENT OF DEVELOPMENT MUST BE SUBMITTED TO THIS OFFICE ON OR BEFORE FEBRUARY 01, 1981. (SEE LAST PAGE OF YOUR APPROVED PERMIT). ENCLOSED IS A POST CARD WHICH MAY BE USED TO SUBMIT THE REQUIRED PROOF OF BENEFICIAL USE.

IF YOU HAVE NOT FULLY COMPLETED YOUR PROJECT, AND YOU HAVE NOT PREVIOUSLY RECEIVED AN EXTENSION OF TIME, YOU MAY REQUEST AN EXTENSION OF TIME PROVIDED THE DELAY IS FOR REASONABLE CAUSE AS INDICATED IN SECTION 42-204, IDAHO CODE, AMENDED. IF YOU HAVE BEEN PREVENTED FROM PROCEEDING BY A GOVERNMENTAL AGENCY OR BY LITIGATION, MORE THAN ONE EXTENSION OF TIME CAN BE GRANTED. A REQUEST FOR EXTENSION OF TIME FORM IS ENCLOSED FOR YOUR CONVENIENCE. PLEASE NOTE THAT A FEE OF \$15.00 MUST BE SUBMITTED WITH THIS FORM.

EITHER THE BENEFICIAL USE POST CARD OR A REQUEST FOR AN EXTENSION OF TIME MUST BE RECEIVED BY THIS DEPARTMENT ON OR BEFORE THE ABOVE MENTIONED DATE, OTHERWISE, THE PERMIT WILL LAPSE AND BE OF NO FURTHER FORCE OR EFFECT WITHIN 60 DAYS.

SINCERELY,

RITA FLECK  
SR. SECRETARY

ENCLOSURES

MICROFILMED



State of Idaho

# DEPARTMENT OF WATER RESOURCES

STATE OFFICE, 373 W. Franklin Street, Boise, Idaho

JOHN V EVANS  
Governor

C STEPHEN ALLRED  
Director

Mailing address  
Statehouse  
Boise, Idaho 83720  
(208) 384-2215

January 25, 1980

Silver Sage Water Corp.  
Star Rt. 6-Box 457  
Grandview, Idaho 83624

Dear Sirs,

RE: Permit No. 61-7394

Enclosed is a copy of your approved Application for Permit. We direct your attention to the conditions of approval as listed on the fourth page.

Sincerely,

DAVID R. TUTHILL, JR.  
Supervisor, Water Allocations Section

DRT:lr

Enclosure

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State of Idaho  
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: 6LS

APPLICATION NUMBER: 61-7394

CHECK:

- ☒ Source.  
☒ Point of diversion.  
☒ County.  
☒ Description of diverting works.  
☒ Time required for beneficial use of water.  
☒ Place of use or acres irrigated.  
☒ Map.  
☒ Signature.  
☒ Fee.  
☐ Yes ☒ No Field check required.  
☐ Yes ☒ No Critical groundwater area.  
☐ Yes ☒ No Request dam safety information. Sent by: \_\_\_\_\_ Date: \_\_\_\_\_  
☒ Yes ☐ No\* In form to receipt.

Field check by: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: \_\_\_\_\_

SEND COPIES TO:

- ☒ Idaho State Health Department.  
☐ Idaho Fish and Game Department.  
☐ Idaho Department of Lands.  
☐ U.S. Bureau of Land Management.  
☐ U.S. Forest Service.  
☐ Other \_\_\_\_\_

Copies sent by: KK

Date: 12/28/79

PROCESSING:

- ☐ Yes ☐ No Platted by: \_\_\_\_\_ Map No. \_\_\_\_\_  
☒ Yes ☐ No Other rights on same place of use. 61-2194 for navigation only  
☒ Yes ☐ No\* In form for advertising.  
Final date for protests: 11/4/80  
☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 11/7/80  
☒ 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? \_\_\_\_\_  
12/13/79 Date of priority recommended.  
Special conditions of approval or cover letter. I.P. GW letter

By: DAS

Date: 1/16/80

STATE OFFICE REVIEW:

- 04  
Send receipt w/ approved app.  
☐ See attached sheet for more information.

By: Jeni

Date: 1/22/80

Department of Water Resources

61-2394

SILVER SAGE WATER CORP.

P.O. BOX 457, STAR RT. B, GRANDVIEW, ID 83624

Source: GROUNDWATER

Date Filed: 12/13/1979

Amount: 0.40 CFS

Diversion Point: NESE Sec 09 T 04S R 05E, ELMORE Co.

Use: DOMESTIC (0.40 CFS) from 01/01 to 12/31

Place of Use: NESE Sec 09 T 04S R 05E

Diversion Means: WELL & PUMP

RECEIVED