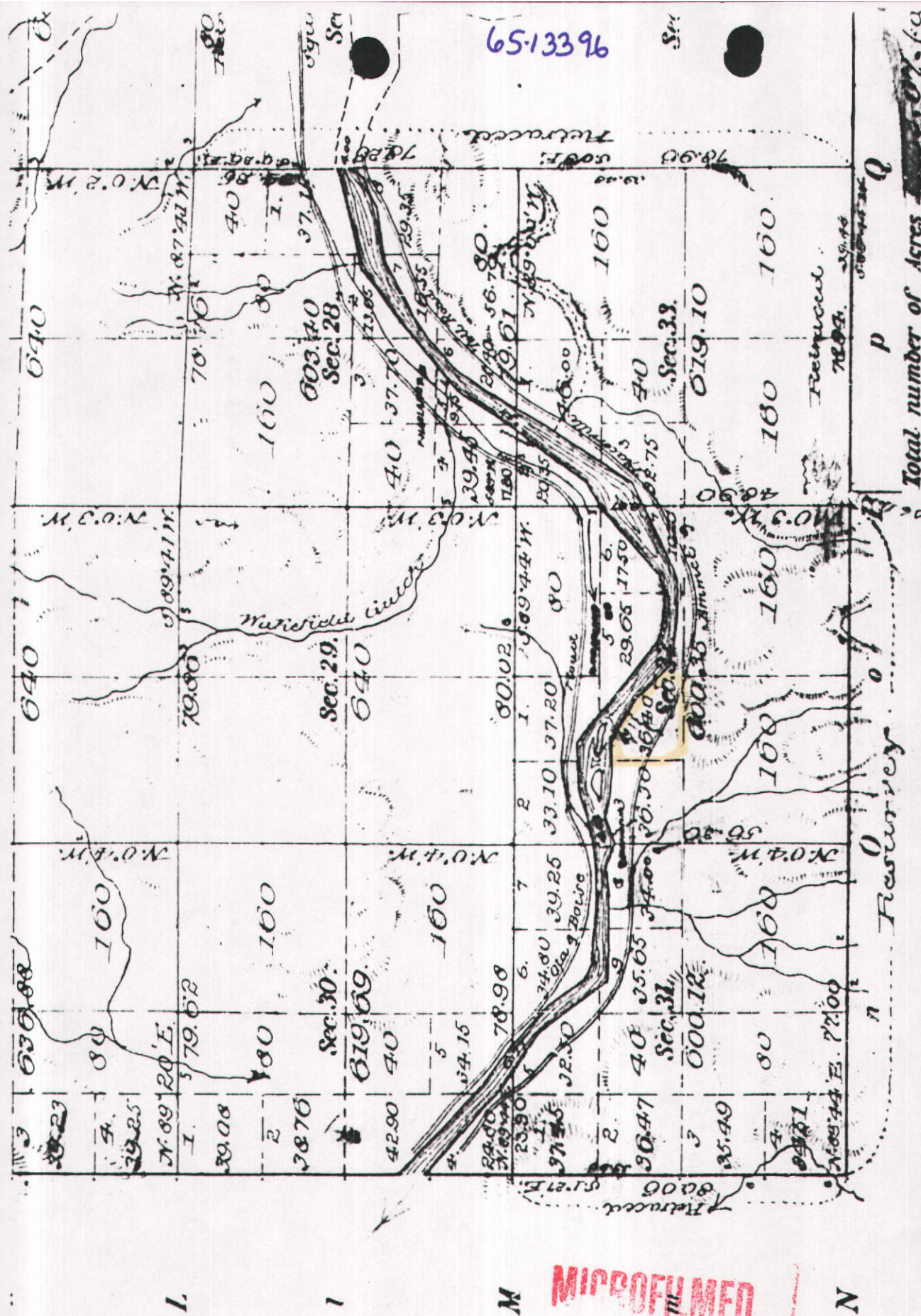


65-13396

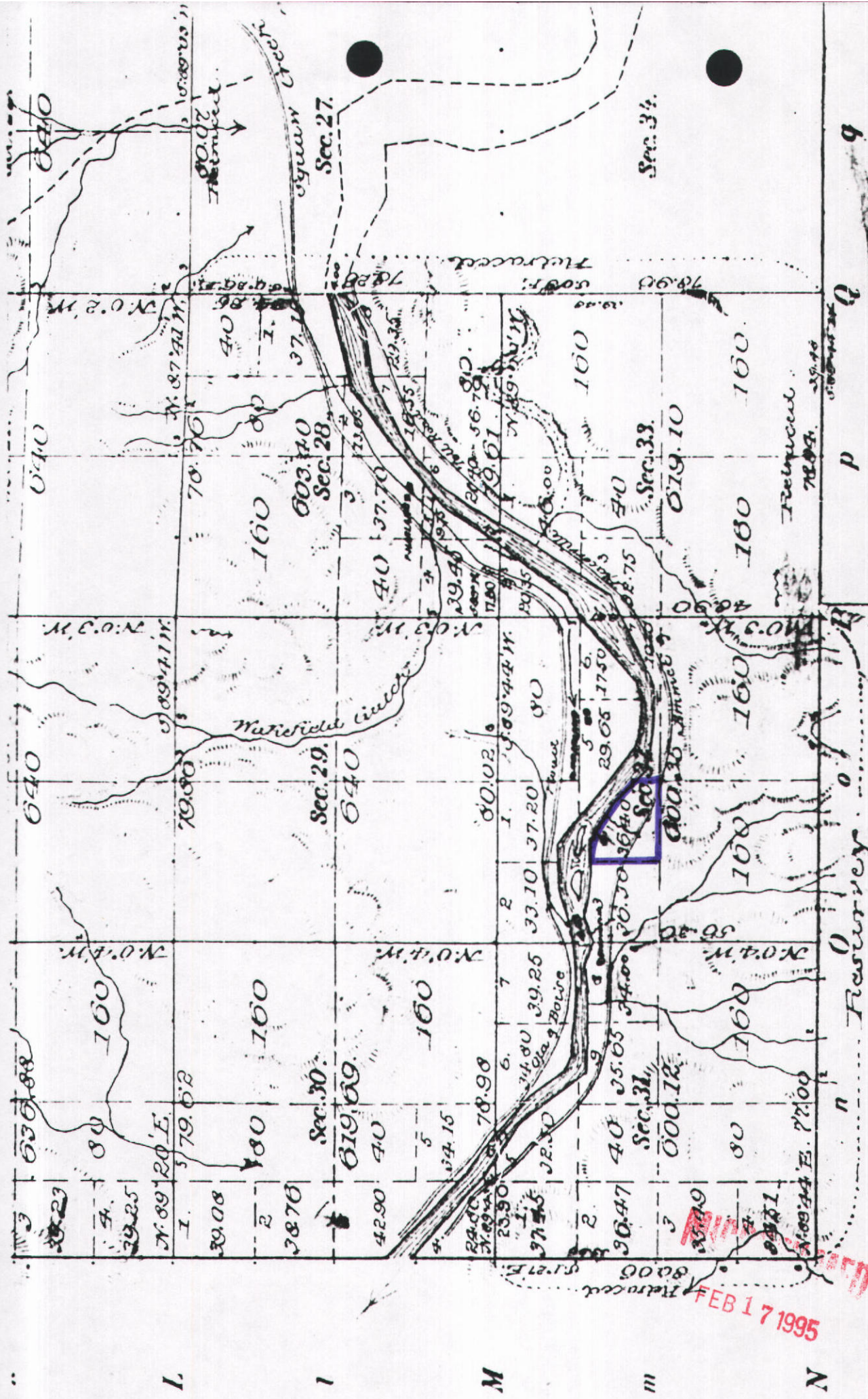


Surveys Designated	By Whom Surveyed	Date of Contract	Amount of Survey M. Ch. Lk.	When Surveyed	Amount of Survey M. Ch. Lk.
Township lines (Resurvey) Subdivisions	William L. Hinshaw	August 18-1892	1 27 00	March 30-1892	19 10 10
Meanders	"	"	32 58 08	"	"
	"	"	9 09 10	"	"

MICROFILMED

SEP 15 1992

Orthophotograph prepared from 1:80,000-scale



Total number of Acres **507. Additional**

Survey Designated	By Whom Surveyed	Date of Contract	Amount of Survey M. ^{1/4}	When Surveyed	Main Rectification
Township lines (Fresno County)	Abraham L. Alvares	August 18-1891	1 22 00	April 30 1892	
Subdivisions	"	"	33 58 08	"	19 10 'E
Meanders	"	"	9 09 10	"	"

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 65-13396

Priority: June 19, 1992

Maximum Diversion Rate:

0.02 CFS

Maximum Diversion Volume:

0.6 AF

This is to certify, that ROBERT E MULLINS
DOREEN E MULLINS

RT 1 BOX OC1

HORSESHOE BEND ID 83629

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated June 19, 1992; and has submitted Proof of Beneficial Use on August 3, 1993. An examination indicates that the works have a diversion capacity of 0.030 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>
DOMESTIC	01/01 to 12/31	0.02 CFS	0.6 AF

LOCATION OF POINT(S) OF DIVERSION: Lot 4 (SENW), Sec. 32, Township 07N, Range 02E
BOISE County

PLACE OF USE: DOMESTIC

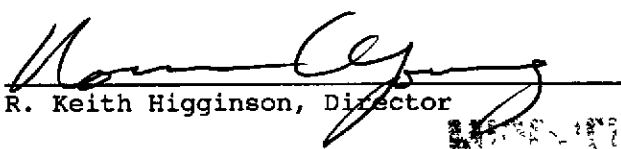
TWN RGE SEC

07N 02E 32 Lot 4 (SENW)

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. Domestic use is for 1 home.

This license is issued pursuant to the provisions of Section 42-219, Idaho Code. Witness the seal and signature of the Director, affixed at Boise, this 4TH day of FEBRUARY, 1995.


R. Keith Higginson, Director

FEB 17 1995

RECEIVED

AUG 3 1993

OFFICE USE ONLY
Amt. of Fee \$ 50.00
Date 8-3-93
Receipt No. W010579
Receipt by [Signature]

Department of Water Resources

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources considers this form 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, when necessary, or a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

1. Permit No. 65-13396 Telephone No. 793-2743
2. Name(s) of Permit Holder(s): Mullens, Robert
3. Mailing Address: Rt 1 Box OC1 Horseshoe Bend 83629
4. Source of Water: Groundwater
If **GROUNDWATER**, Well Driller's Name: SOS Date Drilled: 6/92

OPTIONAL:

Pump horsepower: 1/2 Pressure (psi): _____ Dynamic pumping level (ft.): _____

5. Extent of Use (as authorized by the permit):

Domestic 1 (No. of households) Stockwater _____ (No. and type of stock)
Irrigation <1/2 (No. of acres) Other _____

6. Total rate and/or volume for which proof is submitted .04 cfs OR _____ acre/feet

7. Refer to the approval conditions on your permit and respond accordingly:

Measuring device: Required? _____ Yes _____ No Installed? _____ Yes _____ No

OR

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

8. Fee Enclosed: \$ 50 (See License Fee Schedule on back of Instruction Sheet)

9. Person to contact to accompany the Department representative during field examination of the water system.

Same as above
Name _____ Telephone No. _____

Same
Address _____

10. 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.

8-3-93 Robert E. Mullens
Date _____ Signature (and title, if on behalf of a company or organization) _____

AUG 30 1993

State of Idaho
Department of Water Resources

Permit To Appropriate Water

NO. 65-13396

Proposed Priority: June 19, 1992 Maximum Diversion Rate: 0.04 CFS

This is to certify, that DOREEN E MULLENS
ROBERT E MULLENS
RT 1 BOX OC1

HORSESHOE BEND ID 83629

has applied for a permit to appropriate water from: GROUNDWATER
and a permit is APPROVED for development of water as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>
DOMESTIC	01/01 to 12/31	0.04 CFS

LOCATION OF POINT(S) OF DIVERSION: Lot 4(SESENW), Sec. 32, Township 07N, Range 02E
BOISE County

PLACE OF USE: DOMESTIC
TWN RGE SEC

07N 02E 32 Lot 4(SENW)

CONDITIONS/REMARKS:

1. Proof of construction of works and application of water to beneficial use shall be submitted on or before October 3, 1993.
2. Subject to all prior water rights.
3. Project construction shall commence within one year from the date of permit issuance and shall proceed diligently to completion unless it can be shown to the satisfaction of the Director of the Department of Water Resources that delays were due to circumstances over which permit holder had no control.

This permit is issued pursuant to the provisions of Section 42-204, Idaho Code.
Witness the signature of the Director, affixed at Boise, this

2nd day of September, 1992

R. Keith Higginson
for R. Keith Higginson, Director

APPROVED

SEP 15 1992

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR PERMIT

To appropriate the public waters of the State of Idaho

1. Name: ROBERT E MULLENS 208-793-2743
Address: RT 1 BOX OC1
HORSESHOE BEND ID 83629
OR
Name: DOREEN E MULLENS 208-793-2743
Address: RT 1 BOX OC1
HORSESHOE BEND ID 83629
2. Source: GROUNDWATER Trib. to:
3. Location of Point of Diversion: 64 SESENW Sec. 32, Township 07N, Range 02E
BOISE County
4. Water will be used for the following purposes:

Purpose	From	To	CFS	(or)	AF
DOMESTIC	01/01	12/31	0.040		
5. Total quantity to be appropriated is:
0.040 CFS (and/or) AF
6. Proposed diverting works:
 - a. Description of ditches, flumes, pumps, headgates, etc.
DRILLED WELL WITH DOMESTIC SYSTEM
 - 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 125
feet.
 - d. Is groundwater with a temperature greater than 90F being sought? NO
7. Time required for the completion of the works and application of
the water to the proposed beneficial use is 2 years.
8. Description of proposed uses:
DOMESTIC

SEP 15 1962

9. Place of Use: DOMESTIC

TWN RGE SEC
07N 02E 32 64 SENW

10. Describe any other water rights used for the same purposes.

A65-12582 B

11. 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.

12. Remarks:

13. Map of proposed point of diversion and place of use attached? ☒

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.

Robert E. Mullins
Applicant

Received by JFW Date 4/19/92 Time 9:00 AM Preliminary check by 6

Fee \$ 30.00 Receipted by JFW # W014932 Date 4/19/92

Publication prepared by GG Date 6-24-92 Published in Idaho World

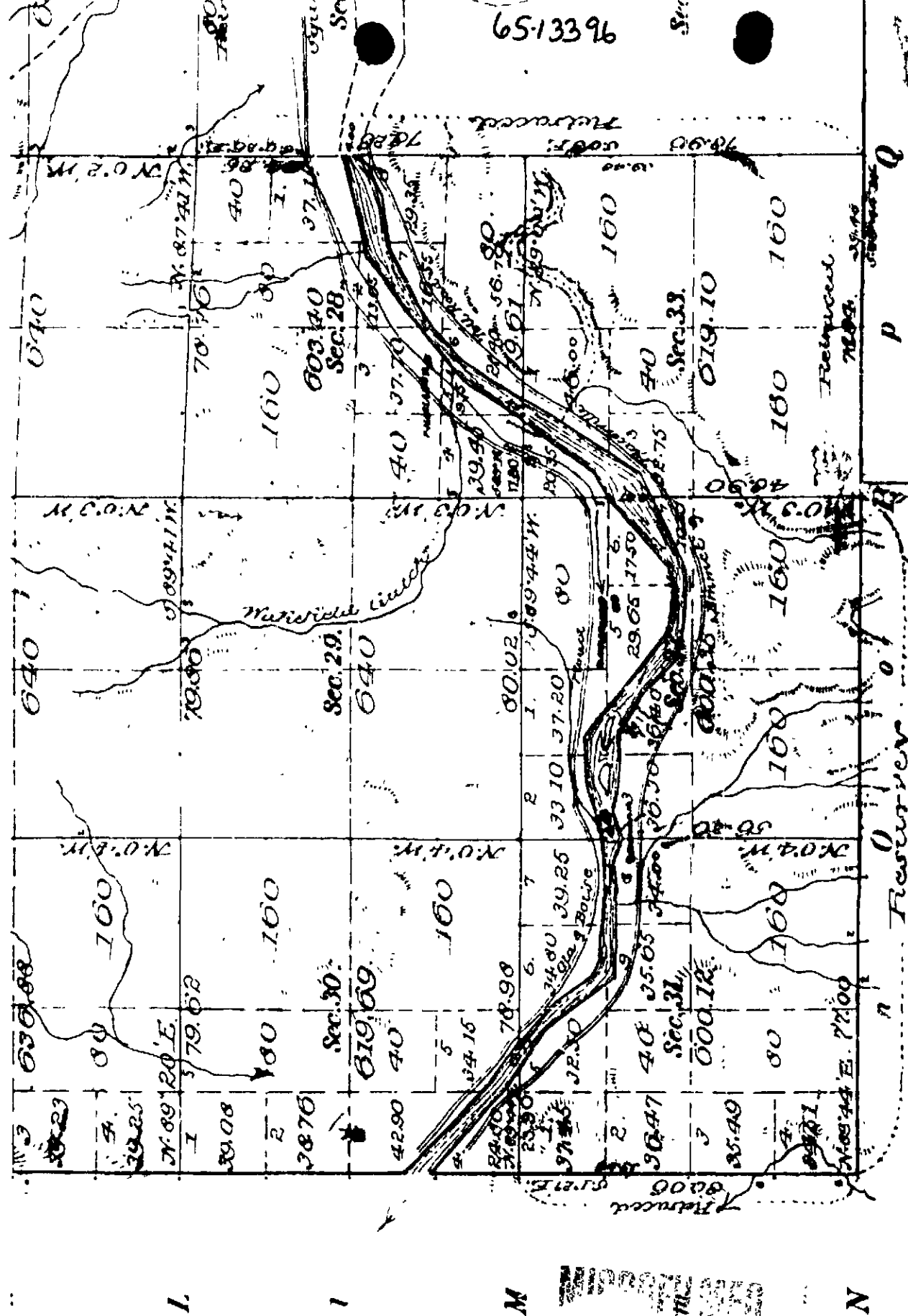
Publication approved at Date 7-21-92
7/1 & 7/8/92

Drilling Permit 65-92-W-127

65-13396

65-13396

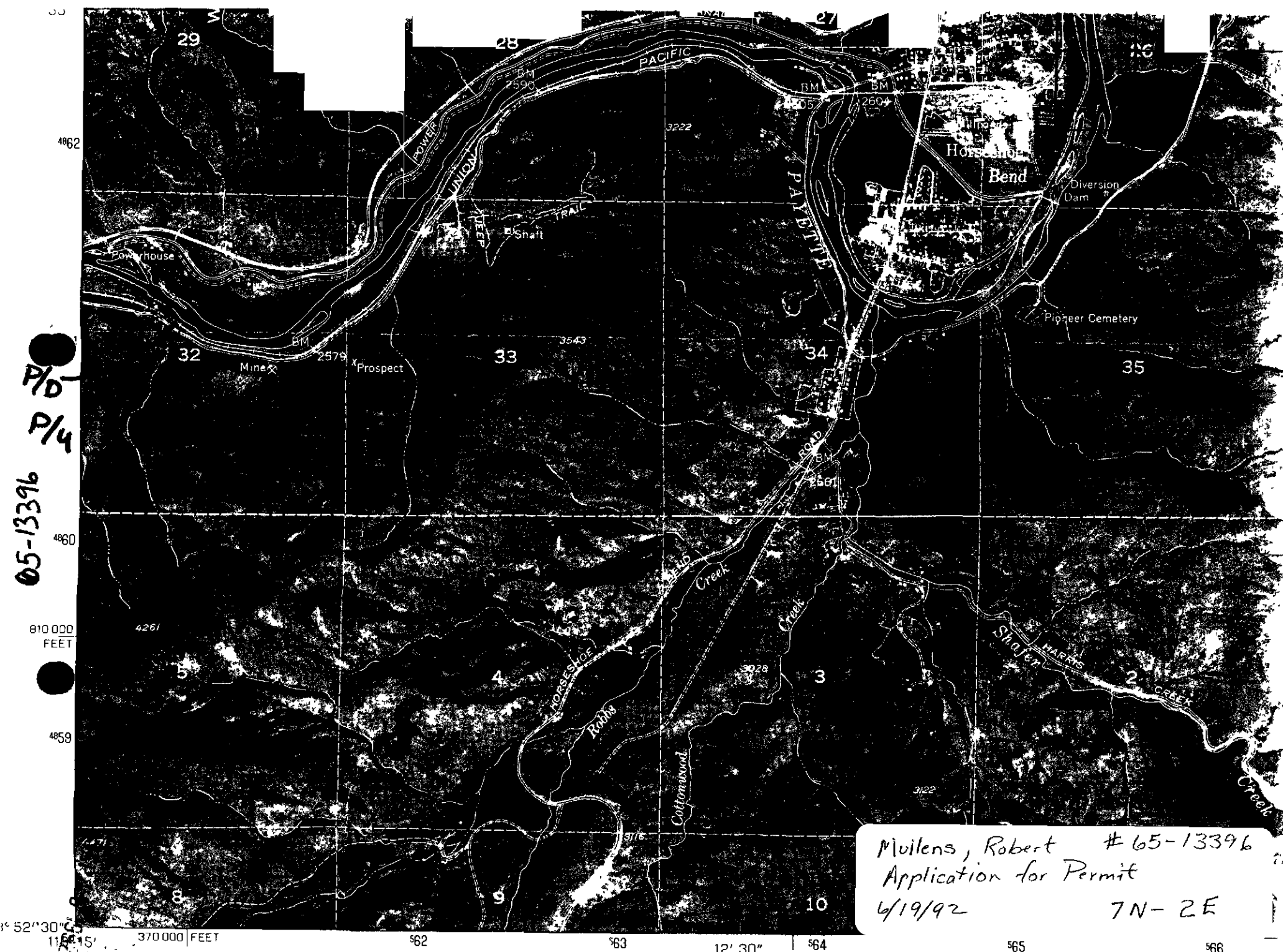
Sec



Total number of Acres 1092.10

Survey Designated	By Whom Surveyed	Date of Contract	Amount of Survey M. Ch.	When Surveyed	Mean Spectral
Township lines (Fire Survey)	Benjamin L. Flanagan	August 18-1892	1 27 00	April 30-1892	19'10" E
Subdivisions	"	"	33 58 08	"	"
Meanders	"	"	9 09 10	"	"

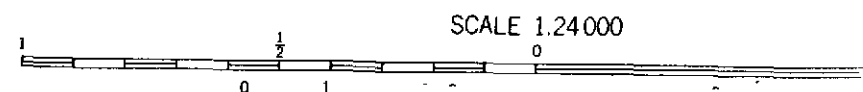
SEP 15 1992



P/O
P/4
05-13396

Muilens, Robert #65-13396
Application for Permit
6/19/92 7N-2E

Produced by the Geological Survey
in cooperation with the U.S. Forest Service



BOISE COUNTY ASSESSOR
P O BOX 127
IDAHO CITY, ID 83631-0127

ADDRESS CORRECTION REQUESTED

CATEGORY DESCRIPTION

12 RURAL RES TR
46 MANUFACTURED HS
47 IMP TO 46 OR 65
LESS HOMEOWNER EXEMPTION
.989

SEP 15 1992

PROPERTY ADDRESS
PREVIOUS NUMBER

T7N R2E SEC 32

A PORTION OF SESENW OR TAX 364
1970 DIPLOMAT 12X61 DN 11798

IMPORTANT NOTICE — THIS IS NOT A BILL

PARCEL NO R1 07N02E324700 A

TAX CODE

6-00

LOTS / ACRES

.989 AC

MARKET VALUE

8,200
5,918
3,220
4,919
13,119*

PRESORTED
FIRST CLASS MAIL
U S POSTAGE PAID
IDAHO CITY, ID 83631-0127
PERMIT NO 2

1992

TAXPAYERS

VALUATION

ASSESSMENT NOTICE

For a full explanation of the valuation
listed on this statement

IF THERE ARE ANY QUESTIONS
REGARDING THIS STATEMENT
NOTIFY THE ASSESSOR'S OFFICE BEFORE

JUNE 19, 1992

See the reverse side for further references
KEEP THIS COPY FOR YOUR RECORDS

Mail To

MULLINS, ROBERT LOWME

MULLINS, ROBERT

RT. 1, BOX 001

HORSESHOE BEND, ID 83629



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 6, 1995

ROBERT E MULLINS
DOREEN E MULLINS
RT 1 BOX OC1
HORSESHOE BEND ID 83629

RE: WATER RIGHT NO. 65-13396

Dear Water Right Holder(s):

Enclosed is a copy of the Water Right License issued on the above referenced permit. If you have any questions, please contact me within 10 days of receipt of this license.

Sincerely,

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

Shelley W. Keen
Water Rights Supervisor

SK:rl

Enclosure

RECEIVED

FEB 17 1995

LICENSE REVIEW CHECKLIST



PERMIT NO. 105-13396 DATE 1-26-95

NAME	Yes ☐ No ☒	Or Address Change? <u>Corrected spelling of Mullins</u>
PRIORITY DATE	☐ ☒	Advance? ☐ Advanced to: ☐ Order to reinstate needed? ☐ Incorrect fee for rate recommended? <u>NA</u>
SOURCE	☐ ☒	Changes or just clarification of originally intended source? ☐ Notice of Intent to Void necessary? ☐
POINT OF DIV	☐ ☒ ☐ ☒	Amendment needed? ☐ Overlaps? ☐
PLACE OF USE	☐ ☒ ☒	Amendment needed? ☐ Overlaps? <u>A105-12592B (Spring)</u> DOMESTIC ALSO FOR .01 CFS
DIV RATE	☒ ☐	Permit/fee limits: <u>.04 cfs</u> Meas Q = ☐ Theo Q = <u>.03</u> Recommend: <u>.02</u> <u>Reduced based on examiner's recommendation of in-house only volume.</u> Combined rates exceed capacity ☐
ANNUAL VOLUME	☐ ☒	Volume Limit: ☐ Season: ☐ Calculations: <u>Standard internal domestic</u> Flow limit: ☐ cfs x ☐ x 1.9835 = ☐ Combined volumes exceed capacity/allowable ☐
USES	☐ ☒	Change in Nature of Use or additional uses? ☐ Amendment necessary? ☐
REMARKS	☐ ☒ ☐	Multiple p/d(s) in 1/4 1/4? ☐ Other ☐
CONDITIONS	☐ ☒ ☐ ☒ ☐ ☒ ☐ ☒ ☐ ☒	Measuring/Locking Devices Watermaster control - District ☐ Irrigation Overlap Water Quality Other ☐ Heat/Cool/ Fish verified ☐
COMMENTS: <u>Domestic ADT claim A105-12592B is for .01 cfs from a spring for domestic use.</u>		

RECOMMENDED	CFS	VOL	SRBA Claim Filed	<u>NO</u>
<u>Domestic</u>	<u>.02</u>	<u>.6</u>	Adjustment Memo Needed	<u>YES</u>
☐	☐	☐	LICENSE	☒
☐	☐	☐	1ST AMENDMENT LETTER	☐
☐	☐	☐	FINAL AMENDMENT LETTER	☐

JAN 20 1955

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

Department of Water Resources

A. GENERAL INFORMATION

Permit No. 65-13396

1 Owner: Robert E. & Doreen E. Mullins Phone No. 793-2743

Current Address: RT 1 Box DC1, Horseshoe Bend, ID 83629

2. Accompanied by: _____ EXAM DATE: 3/31/94

Address: _____ Phone No. _____

Relationship to Permit Holder: _____

3. Source. Groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with the same place of use: many - see overlap sheet

2. Other water rights with the same point of diversion: 65-02664

C. DIVERSION AND DELIVERY SYSTEM

1. Point(s) of Diversion:

[illegible]

2. Place(s) of Use:

Indicate Method of Determination *same as p/d*

[illegible]

3. **Delivery System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe I.d. as applicable. *NF*

(No Field Exam required,
Therefore no system diagram)

Scale: 1" = _____

____ Copy of USGS 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)

Photo of Diversion and System Attached

4. NR - Pump size taken from roof of E/H.

Well or Diversion Identification No.*	Motor Make	Hp	Motor Serial No.	Pump Make	Pump Serial No. or Discharge Size
		1/2			

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

D. FLOW MEASUREMENTS

1.

Measurement Equipment	Type	Make	Model No	Serial No.	Size	Calib. Date

2. Measurements:

13 17 1995

E. NARRATIVE/REMARKS/COMMENTS

OVERLAPS P/D - Same QD, different P/D
P/U - Same QD, different place of use

Following data confirmed through the Boise County Assessors office.

Parcel No. - DTN02E324700

T7N, R2E, SEC. 32 SENW

(1) Home - Mobile Home

Well drilled 6/16/92 by SOS Well Drilling,
drilling permit NO. 65-92-W-127.

Well Depth - 125'

Casing Depth - 48'

Static Level - 30'

} see well log

As per proof of B/U, a $\frac{1}{2}$ h.p pump delivers water to one home for domestic use. System capacity is 0.03 cfs, which is less than the requested allocation of 0.04 cfs. Therefore, recommend Licensing for 0.03 cfs for domestic use.

$$\text{Theoretical: } Q = \frac{(8.8)(0.7)(0.5)}{40 + (2.31 \times 30)} = \frac{3.08}{109.3} \approx 0.03 \text{ cfs}$$

Note: Dynamic Pumping Level determined as per office diagram and specifications. System pressure assumed as per pump size.

Have conditions of permit approval been met? ☒ yes ☐ no

FEB 17 1995

F. FLOW CALCULATIONS

____ Additional Computation Sheets Attached

Measured Method:

*(See Narrative for Theoretical System Capacity Calculation)***G. VOLUME CALCULATIONS**1. Volume Calculations for Irrigation: *N/A* $V_{IR} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) =$ _____ $V_{DR} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 =$ _____ $V = \text{Smaller of } V_{IR} \text{ and } V_{DR} =$ _____

2. Volume Calculations for Other Uses:

 $V_{\text{domestic}} = 0.6 \text{ AFA}$ **H. RECOMMENDATIONS**

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
* <u>Domestic</u>	<u>1/1</u>	<u>12/31</u>	<u>0.03</u>	<u>0.6</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Totals:			<u>0.03</u>	<u>0.6</u>

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

I. AUTHENTICATIONField Examiner's Name Rick Collingwood Date 3/31/94

Reviewer _____ Date _____

SEAL

* See attached explanation memo. B

FEB 17 1995

MEMORANDUM

TO: File 65-13396 / Robert E. Mullins
FROM: Brenda Chapman
DATE: January 26, 1995
RE: Recommendation Adjustment(s)

=====

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

D. FLOW CALCULATIONS

The domestic rate is reduced to coincide with the examiner's recommendation of an in-house only volume.

There is no confirmation on the exam of a lawn or garden being irrigated.

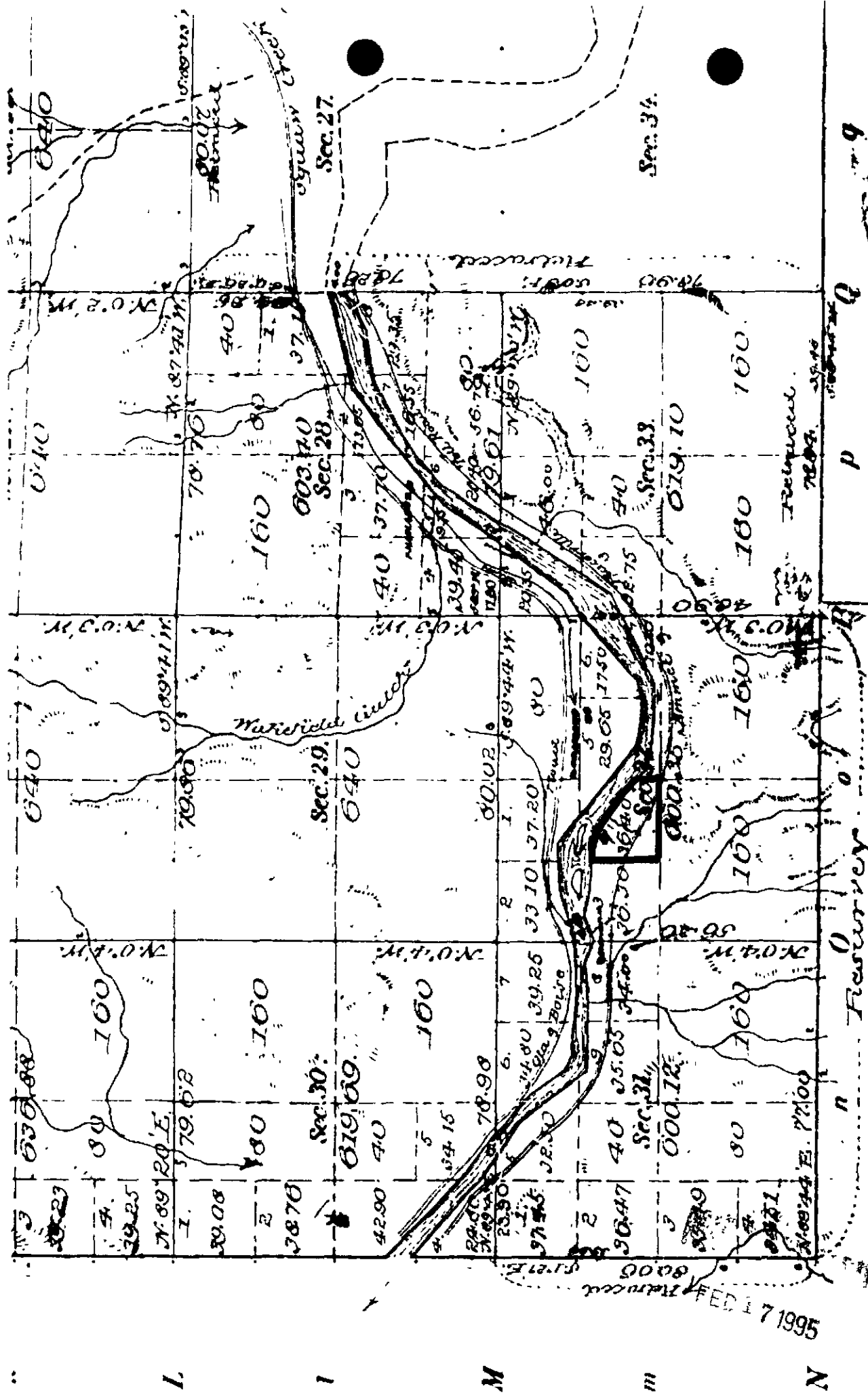
I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use	Rate of Div	Annual Vol
Domestic	1-01 to 12-31	.02	.6

See item D.

6
1/27/95



n
 p
 q
 Total number of Acres ~~1500~~ 1500. Additional

Survey Designated	By Whom Surveyed	Date of Contract	Amount of Survey M. Lk.	When Surveyed	Main Production
Township lines (Hesler-vee) Subdivisions	Abraham L. Hesler-vee	August 18-1894	1 22 00	April 30 1892	19' 10' E.
Meanderers:	"	"	22 58 08	"	"
	"	"	9 09 10	"	"

IDAHO DEPARTMENT OF WATER RESOURCES

WELL INSPECTION FORM

i. DRILLING PERMIT NO: 65-92-W-127 OTHER APPLICABLE NO: _____

OWNER: Robert & Correen Mullins Phone: 793-2743
 Address: Rt 1 Box DC1, Horseshoe Bend, ID 83629

WELL LOCATION: Twp 7N, Rge. 2E, Sec. 32, SE 1/4 NW 1/4 ^{Lot 4}
 County Boise (Provide sketch map and photo on reverse.)

i. DRILLER: SOS Well Drilling Lic. No. 212
 When Drilled? 6/16/92

WELL CONSTRUCTION NR

Casing Diameter 6 inches Water tight cap? ☐ Yes ☐ No Access Port: ☐ Yes ☐ No
 Casing $\geq$ 12 inches above ground? ☐ Yes ☐ No - Describe _____
 Depth of Casing 48 ft. Method Drilled Rotary & Air
 Condition of Well Casing: ☐ Good ☐ Fair ☐ Poor Describe _____
 Control Valve? ☐ Yes ☐ No Pressure Gauge: ☐ Yes ☐ No
 Condition of Piping and Valving _____
 Auger to a depth of 125 ft. Evidence of Annular Seal ☐ Yes ☐ No
 Are there obvious construction problems that may be a source for contamination or waste of water?
☐ Yes ☐ No (Describe in Remarks and Attach Photo - On Reverse)

HYDROLOGIC INFORMATION

Depth to Static Water 30 ft. Water Temperature _____ °F
 Flowing Artesian ☐ Yes ☐ No Pressure: _____ (psi)
 Water Sample Taken? ☐ Yes ☐ No If yes, describe purpose _____
 Water Quality Measurements/Observations (Describe) _____

WELL USE:

☒ Domestic ☐ Irrigation ☐ Stock
☐ Test ☐ Municipal ☐ Industrial
☐ Abandoned ☐ Waste Disposal/Injection ☐ Not Used
☐ Other: _____

Accepted
 7/1995

NO FIELD exam required, therefore particulars of
will not known.

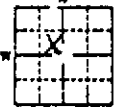
Rick Collingwood, Water Rights Examiner
Signature of Dept. Representative & Title

2
Inspection Date

PHOTOS, DRAWINGS, OTHER ATTACHMENTS:

RECEIVED
FEB 17 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>Mullins, Robert & Doreen</u> Address <u>Rt 1 Box 001</u> <u>Horseshoe Bend, Ida 83629</u> Drilling Permit No. <u>65-92-W-127</u> Water Right Permit No. _____	7. WATER LEVEL Static water level _____ 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 _____ Describe artesian or temperature zones below.																																																				
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Well diameter increase ☐ Modification ☐ Abandoned (describe abandonment or modification procedures such as liners, screen, materials, plug depths, etc. in lithologic log, section 9.)	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>10</td><td>No test</td><td></td></tr></tbody></table>	Discharge G.P.M.	Pumping Level	Hours Pumped	10	No test																																															
Discharge G.P.M.	Pumping Level	Hours Pumped																																																			
10	No test																																																				
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Monitor ☐ 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>2"</td><td>0</td><td>6</td><td>Topsoil</td><td>no</td><td></td></tr><tr><td>2"</td><td>6</td><td>18</td><td>Gray/Blue Rock</td><td>no</td><td></td></tr><tr><td>4"</td><td>18</td><td>21</td><td>Gray Blue Rock</td><td>no</td><td></td></tr><tr><td>4"</td><td>21</td><td>25</td><td>Decomposed granite</td><td>no</td><td></td></tr><tr><td>4"</td><td>25</td><td>45</td><td>BROKEN BLACK ROCK</td><td>no</td><td></td></tr><tr><td>4"</td><td>45</td><td>80</td><td>Black & white granite</td><td>no</td><td></td></tr><tr><td>4"</td><td>80</td><td>25</td><td>Black/white granite</td><td>yes</td><td></td></tr></tbody></table>	Bore Diam	Depth		Material	Water		From	To	Yes	No	2"	0	6	Topsoil	no		2"	6	18	Gray/Blue Rock	no		4"	18	21	Gray Blue Rock	no		4"	21	25	Decomposed granite	no		4"	25	45	BROKEN BLACK ROCK	no		4"	45	80	Black & white granite	no		4"	80	25	Black/white granite	yes	
Bore Diam	Depth		Material	Water																																																	
	From	To		Yes	No																																																
2"	0	6	Topsoil	no																																																	
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4"	18	21	Gray Blue Rock	no																																																	
4"	21	25	Decomposed granite	no																																																	
4"	25	45	BROKEN BLACK ROCK	no																																																	
4"	45	80	Black & white granite	no																																																	
4"	80	25	Black/white granite	yes																																																	
4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Auger ☐ Reverse rotary ☐ Cable ☐ Mud ☐ Other _____ (backhoe, hydraulic, etc.)	10. Work started <u>6/15/92</u> finished <u>6/16/92</u>																																																				
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>250</td><td>inches 6</td><td>inches 1</td><td>feet 48</td></tr><tr><td></td><td>inches</td><td>inches</td><td>feet</td></tr><tr><td></td><td>inches</td><td>inches</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 ☐ Gun 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></td><td>perforations</td><td>feet</td></tr><tr><td></td><td>perforations</td><td>feet</td></tr><tr><td></td><td>perforations</td><td>feet</td></tr></tbody></table> Well screen installed? ☐ Yes ☒ No Manufacturer _____ Type _____ Top Packer or Headpipe _____ Bottom of Tailpipe _____ 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>15'</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata Describe access port _____	Thickness	Diameter	From	To	250	inches 6	inches 1	feet 48		inches	inches	feet		inches	inches	feet	Number	From	To		perforations	feet		perforations	feet		perforations	feet																									
Thickness	Diameter	From	To																																																		
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Number	From	To																																																			
	perforations	feet																																																			
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6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Boise</u> Address of Well Site _____ (give at least name of road) <u>SE 1/4 NW 1/4 Sec. 32, R. 2, N 27 S 0</u>	11. DRILLER'S CERTIFICATION I/We certify that all minimum well construction standards were compiled with at the time the rig was removed. Firm Name <u>GOS Well Drilling</u> Firm No. <u>212</u> Address <u>4145 N. Blackfoot Road</u> Signed by Drilling Supervisor <u>[Signature]</u> and <u>[Signature]</u> (Operator) <u>[Signature]</u> (If different than the Drilling Supervisor)																																																				

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

August 6, 1993

DOREEN E MULLENS
ROBERT E MULLENS
RT 1 BOX OC1
HORSESHOE BEND ID 83629

PROOF ACKNOWLEDGMENT LETTER

RE: PERMIT NO. 65-13396

Dear Permit Holder:

The department acknowledges receipt of the proof of beneficial use form submitted for the above referenced permit. The next step in the process of developing a water right is for the department to conduct a field examination to determine and confirm the use being made of the water.

If you have questions concerning this matter, please feel free to contact the WESTERN Regional Office in Boise at (208)334-2190.

Sincerely,

Karen L. Gustafson
Secretary/Records Manager

c: IDWR - Region

RECEIVED

AUG 30 1993



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

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

August 4, 1993

Robert and Doreen Mullens
Rt 1 Box OC1
Horseshoe Bend, ID 83629

Re: Permit No. 65-13396

Dear Permit Holder:

The Department is in receipt of the proof of beneficial use and \$50 license exam fee filed in connection with the above referenced permit.

The Department has determined from pertinent sections of the Idaho Code, that when you use a groundwater source and diver 0.04 cfs or less, no license examination fee applies. I have enclosed a copy of the fee schedule for your convenience.

In any case, I have begun the process to refund the \$50 license exam fee that you have submitted. The process takes between two and four weeks and will arrive under separate cover.

If you have any questions, or if I can be of any further assistance, please feel free to contact me.

Sincerely,

Karen L. Gustafson
Secretary/Records Manager

Enclosure

C: Fiscal

RECEIVED

AUG 30 1993

PERMIT NUMBER	OWNER CODE	NAME & ADDRESS	TWP	RGE	SEC	TRACT	LOT	COUNTY
65-92-W-0127-000	0	ROBERT & DOREEN MULLENS RT 1 BOX OC1 HORSESHOE BEND, ID 83629 (208) 793-2743	07N	02E	32	SE NW		BOISE

Subdivision Location and Description:

Subdivision Name:

Well Site Address: CLD MCGREGOR RD

City, State:

Lot(s):

Block(s):

Geographic Location.

Accuracy Code:

Lat: : : N

Long: : : W

Proposed Use of Well: Domestic

Proposed Casing Diameter: 6 In.

Proposed Depth: 150 Ft.

Well Use Comments

Driller License No. 0212

Firm Name SOS WELL DRILLING & PUMP CO

Official: FRANK SKINNER

Permit Status: Permit

Verbal Issue Date:

Date Received: 06/30/1992

Date Approved: 06/25/1992

Proposed Start Date 06/15/1992

Extension Date:

Extension Expiration:

Receipt No

W014923

Receipt Date

06/18/1992

Fee

S 70.00

Specific Conditions:

Permit Remarks:

WELL DRILLER'S LOG REPORT

Drilling Permit No: 65-92-W-0127-000

Water Right No: 65-13396

Injection Permit No:

Nature of Work: NEW WELL

Construction Method: ROTARY & AIR

Number of Monitor Wells:

Casing Diameter: 6 In.

Static Water Level: 30 Ft.

Actual Start Date: 06/15/1992

Depth of Casing: 48 Ft.

Temperature: F.

Well Finish Date: 06/16/1992

Total Depth: 125 Ft

Production Rate: 10.00 GPM

Log Received Date: 08/11/1992

Screen Installed? No

Certification Date:

Field Inspection Date:

Inspector:

Well Log Remarks: NO CERTIFICATION DATE SHOWN ON THIS WELL REPORT.

July 31, 1993

DOREEN E MULLENS
ROBERT E MULLENS
RT 1 BOX OC1
HORSESHOE BEND ID 83629

PROOF DUE NOTICE

RE: PERMIT NO. 65-13396

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 October 1, 1993. (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.

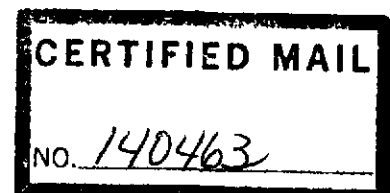
SINCERELY,

Karen L. Gustafson
Secretary/Records Manager

Enclosures

Handwritten signature

AUG 30 1993





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

CECIL D. ANDRUS
GOVERNOR

R. KEITH HIGGINSON
DIRECTOR

September 3, 1992

DOREEN E MULLENS
ROBERT E MULLENS
RT 1 BOX 0C1
HORSESHOE BEND ID 83629

PERMIT APPROVAL NOTICE

RE: PERMIT NO. 65-13396

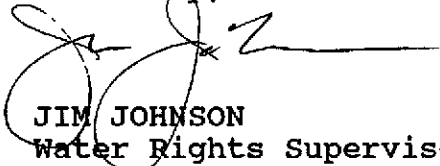
Dear Permit Holder(s):

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

As a permit owner you must commence the excavation or construction of the diverting works within one year of the date the permit was issued, and you must proceed diligently until the project is completed. The date shown under Condition No. 1 is the date when the project must be completed. You will receive a "Proof Due Notice" from this Department approximately 60 days prior to the completion date requiring you to file either a Proof of Beneficial Use form stating that the project has been completed or file a Request for an Extension of Time in which to file the proof statement.

You should be aware that you are located within a drainage basin where surface water diversions are regulated by a watermaster. It is possible that diversion of groundwater under your permit may cause a reduction of surface water flow. Siting your well as far as possible from surface water channels and casing your well so that groundwater tributary to surface water flows are not diverted will reduce the potential for the watermaster to regulate your water use.

Sincerely,



JIM JOHNSON
Water Rights Supervisor

MICROFILMED

SEP 15 1992

JJ:cz

Enclosure

RECEIVED

JUL 21 1992

The Idaho World

P O Box 220
Idaho City, ID 83631
208 392-4989

P O Box 99
Garden Valley, ID 83622
208 462-3487

Department of Water Resources
Western Regional Office

State of Idaho >
>
County of Boise >

Wayne Hart, being duly sworn, deposes and says: that he is the manager and principal clerk of THE IDAHO WORLD, a weekly newspaper published at Idaho City, in the County of Boise and the State of Idaho; the said paper has been and is in general circulation in the county afore

vicinity of Idaho City; that the advertisement which is hereto attached, was published once a week for two (2) consecutive entire and regular issue of every number during the period and time of publication in the newspaper and not a supplement; been established and regularly and continued for more than seventy eight weeks past publication of this notice. Such notice the issue beginning with July 1, 1992 the issue of July 8, 1992.

NOTICE OF APPLICATION FOR WATER RIGHT
The Following application(s) have been filed to appropriate the public waters of the State of Idaho:

65-13393

HOVEN, TINA MARIE
HOVEN, SHIRLEY C
HC 77 Box 2871
GARDEN VALLEY, ID 83622

Source: GROUNDWATER

Diversion Pt: LOT 6 (NWSW) Sec 1 T 08N R 05E in BOISE County.
SWSW Sec 1 T 08N R 05E in BOISE County.

Use: DOMESTIC (0.04 CFS)
Total Diversion: (0.04 CFS)

Date Filed: 6/12/1992

In: BOISE County
T08N R05E S01 Lot 6 (NWSW)

65-13396

State of Idaho >
>
County of Ada >

On this 19th day of July in the year 1992, a notary public, personally appeared Wayne Hart identified to me to be the person whose name is within instrument, and being by me declared that the statements therein are true and acknowledged to me that he executed the

MULLENS, ROBERT E
MULLENS, DOREEN E
RT 1 BOX OC1
HORSESHOE BEND, ID 83629

Source: GROUNDWATER

Diversion Pt: LOT 4 (SESENW) Sec 32 T 07N R 02E in BOISE County.

Use: DOMESTIC (0.04 CFS)
Total Diversion: (0.04 CFS)

Date Filed: 6/19/1992

In: BOISE County
T07N R02E S32 Lot 4 (SESENW)

Notary Public for Idaho

Residing at

My commission expires

The permit(s) will be subject to all prior water rights. Protests must be filed with the Director, Dept. of Water Resources, Western Region, 2735 Airport Way, Boise, Idaho 83705 on or before July 10, 1992.

R. KEITH HIGGINSON, Director

Published in The Idaho World July 1, and 8, 1992.

SEP 15 1992

65-13396

MULLENS, ROBERT E
MULLENS, DOREEN E
RT 1 BOX OC1
HORSESHOE BEND, ID 83629

Source: GROUNDWATER

Diversion Pt: LOT 4 (SESENW) Sec 32 T 07N R 02E in BOISE County.

Use: DOMESTIC (.040 CFS)
Total Diversion: (.040 CFS)

Date Filed: 6/19/1992

In: BOISE County
T07N R02E S32 Lot 4 (SENW)

MICROFILMED
SEP 15 1992