

[illegible]

F. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation: Lawn irrigation included in domestic use.

2. Volume Calculations for Other Uses:

Domestic: 1.2 AF for in-house and lawn use.

Additional 0.3 AF for filling hot tub and pools 1 time per week. (Heating of same accomplishes this)

Heating: $0.03 \text{ cfs} \times 1.9835 \text{ AF/CFS/Day} \times 365 \text{ days per year} = 21.7 \text{ AFA}$

G. NARRATIVE/REMARKS/COMMENTS

This field exam was completed by Gary Funderburg in 1986. It has been held since the original owner did not file an SRBA Claim. New owners recently filed SRBA Claim.

No Power use was developed. Domestic and Heating uses were developed.

Domestic Use includes in-house use and use in hot tub and pool associated with 1 home.

Heating Use is for heating of approximately 3000 sq ft home and heating of hot tub and swimming pool.

Have conditions of permit approval been met? ☒ Yes ☐ No

H. RECOMMENDATIONS**1. Recommended Amounts**

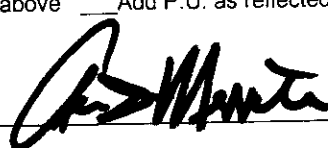
<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>DIVERSION RATE</u>	<u>ANNUAL VOLUME</u>
HEATING	01/01 to 12/31	0.030 CFS	21.70 AF
DOMESTIC	01/01 to 12/31	0.030 CFS	1.5 AF
<u>Totals:</u>		0.030 CFS	21.70 AF

2. Recommended Amendments

☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☒ None

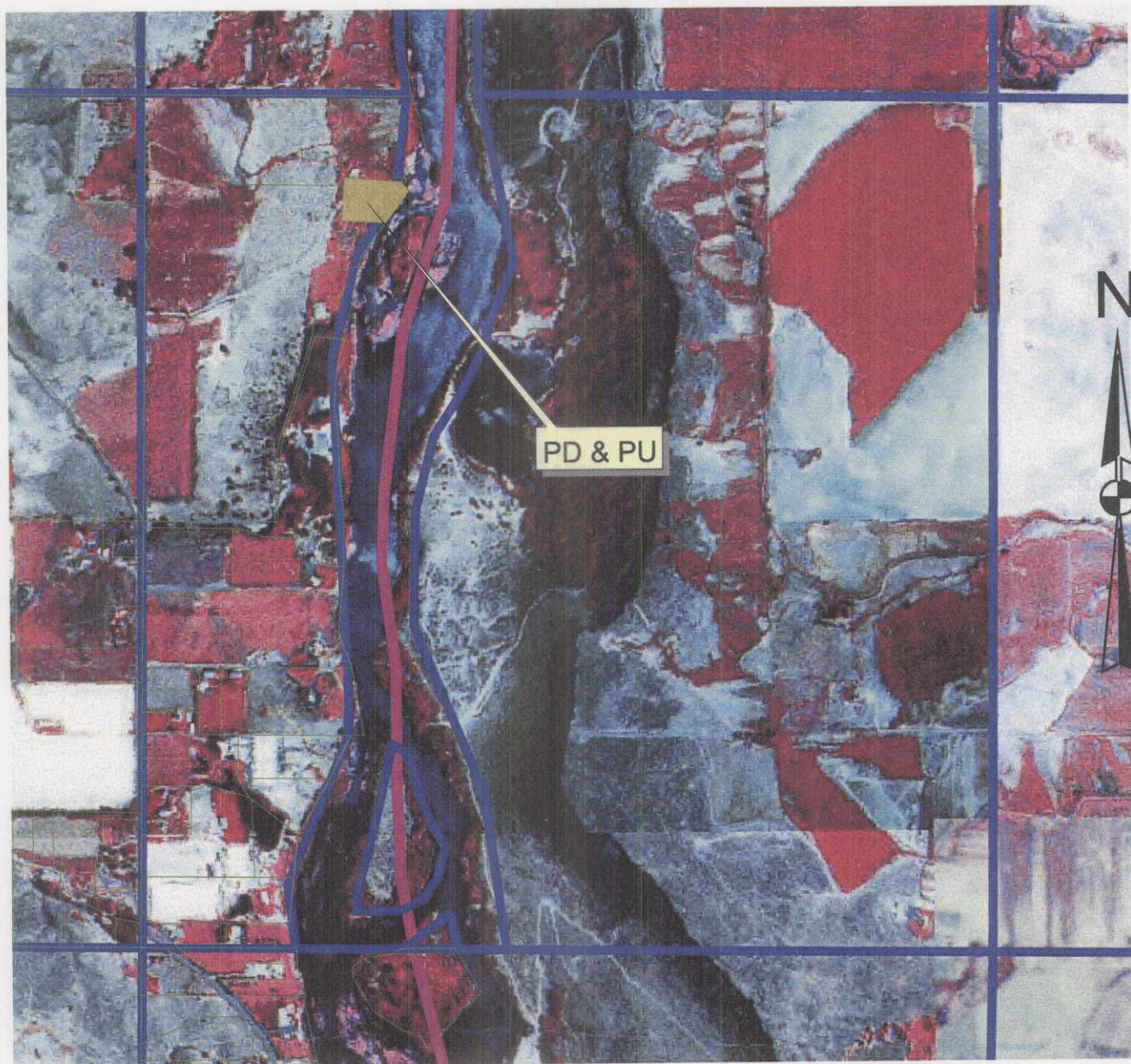
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

I. AUTHENTICATION

Field Examiner's Name  Date 3/1/05

Reviewer _____ Date _____

Field Exam 47-7841



1320 0 1320 2640 3960 Feet

Section 33 T08S, R14E, B.M.

-  Twin_falls.shp
-  PLSS Section LinesGcdb_sections.shp
-  County BoundariesCounties.shp

By ADM
3/1/05

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

RECEIVED

MAY 01 1987

RECEIVED
MAR - 3 2005
DEPARTMENT OF WATER RESOURCES

A. GENERAL INFORMATION

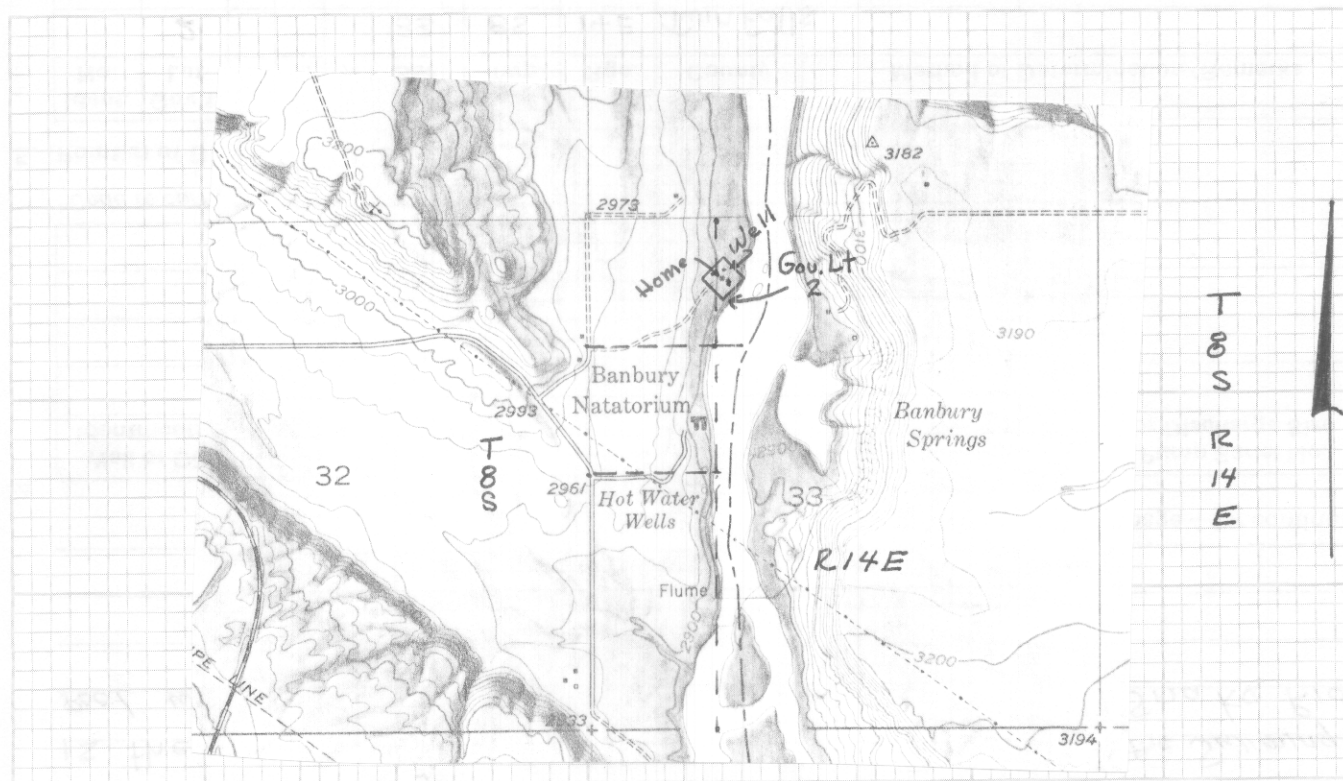
1. Owner: Richard & Beatrice Kopp Permit No. 47-7841
Current Address: Rte 3, Bx 402, Buhl, Ida Phone No. 83316
2. Accompanied by: Richard Kopp EXAM. DATE: 10-1-86
Address: _____ Phone No. 3:00 P.M.
Relationship to Permit Holder: _____
3. Source: groundwater tributary to ✓

B. OVERLAP REVIEW

1. Other water rights with same place of use: NO ☐ Copies Attached
2. Other water rights with same point of diversion: NO ☐ Copies Attached ☐ Copies of Field Exam's Attached

C. SYSTEM DESCRIPTION

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



Scale: 1:240000

2. ☒ Copy of U.S.G.S. Quadrangle Attached
Showing location(s) of point(s) of diversion and
place(s) of use (required). ☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).
☒ Photo of Diversion and System Attached
(required for all but single household domestic groundwater, and stockwater).

System Description (continued)

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

8" dia. well Artisian Flow - 75° F. No temp change at this time
water runs from well to the house which runs thru
a heat exchanger in each room of the house. The water
is then run into the Ht-Spa, then conveyed to the Swimming
pool which discharges the water into the Snake River

☐ See Remarks on page 4 for continuation

4.

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

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

5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
	2				33	8S	14E	Twin Falls	

6. Place(s) of Use:

Indicate Method of Determination

Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
8S	14E	33					Govt												
							142												
							X												

Do not use this space

Do not use this space

D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

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

2. Measurements:

$.576 \text{ cu ft} / 21 \text{ Sec.} = \text{Bucket Method} = 0.032 \text{ cfs.}$

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method: Bucket

2. Alternate Method for Checking Purposes:

F. PUMP EFFICIENCY DATA (Optional)

Discharge Pressure: _____ psi x 2.31 = _____ ft (1); Dynamic pumping level: _____ ft (2)

Total Head: (1) + (2) = _____ (3) ; Flow rate: _____ cfs (4)

Water HP: (3) x (4) ÷ 8.8 = _____ (5)

Meter Input KW: 3.6 x _____ KH x _____ CTR or _____ MULT x _____ PTR x _____ N/ _____ T = _____ (6)

Meter Input HP: (6) x 1.34 = _____ (7)

Panel Input KW: _____ Ave PF x _____ Ave Volts x _____ Ave Amps x .001732 = _____ (6)

Panel Input HP: (6) x 1.34 = _____ (7) Efficiency: (5)/(7) x 100 = _____ %

G. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation:

$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) =$ _____

$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 =$ _____

$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} =$ _____

2. Volume Calculations for Other Uses:

47-7841 Richard Kopp.

Well Location -



Discharge to Snake River.



Pool Recreation use, Domestic,
& Heating of home.

H. REMARKS AND OVERLAP REVIEW ANALYSIS

Recreation is Swimming. pool size $5\frac{1}{2} \times 15 \times 20 = 1650 \text{ cubic ft}$
Heating - is for 3000ft² of Home - Hot Water Heater
Domestic - Home uses for the house & lawn
NO Power
There is also a separate cold-water domestic well (not under permit).

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
Domestic	Jan 1	Dec. 31	0.03 cfs	1.2 MFA
Heating	Jan 1	Dec. 31	0.03 cfs.	N/A
Recreation	Jan 1	Dec. 31	0.03 cfs.	1650 ft ³
Totals:			0.03 cfs.	

2. Recommended Amendments

- ☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☒ None
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

J. AUTHENTICATION

Field Examiner's Name GARY FUNDERBURG
Signature Gary Funderburg
Certification Date _____
Field Report Preparation Date _____

CONSULTANT SEAL

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