

RECEIVED
AUG 16 2004
Department of Water Resources

Permit No: 22-7796

Page 1

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 22-7796

Exam Date: 7/29/1999

1. Current Owner: C & B REESE LLC
290 W 1200 N
FELT ID 83424
(208)456-2633

8/9/2004

2. Accompanied by: TALKED TO MRS REESE
Phone No:
Address:
Relationship to Permit Holder:

3. SOURCE TRIBUTARY
GROUND WATER

B. OVERLAP REVIEW

1. Other water rights with the same place of use: NONE
2. Other water rights with the same point of diversion: NONE

C. DIVERSION AND DELIVERY SYSTEM

1. LOCATION OF POINT(S) OF DIVERSION:

GROUND WATER L30 NE1/4SE1/4 Sec. 6, Twp 06N, Rge 45E, B.M.
TETON County

Method of Determination: FE/GPS

2.

PLACE OF USE: DOMESTIC

Twp	Rge	Sec	NE				NW				SW				SE				
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	Totals
06N	45E	6													X				

Method of Determination:

3. ☐ Delivery System Diagram Attached (required). Indicate all major components and distances between components. Indicate weir size/pipe as applicable.
- ☐ Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.
- ☒ Aerial Photo Attached (required for irrigation of 10+ acres).
- ☒ Photo of Diversion and System Attached

4.

<u>Well or Diversion</u> <u>ID No.*</u>	<u>Motor Make</u>	<u>Hp</u>	<u>Motor Serial No.</u>	<u>Pump Make</u>	<u>Pump Serial No. or Discharge</u> <u>Size</u>
Red Jacket	7.5		subm.		

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

D. FLOW MEASUREMENTS

1.

<u>Measurement</u> <u>Equipment</u>	<u>Type</u>	<u>Make</u>	<u>Model No.</u>	<u>Serial No.</u>	<u>Size</u>	<u>Calib. Date</u>

2. Measurements:

use standard amounts 9 homes 0.14 cfs

E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

Measured Method:

$$CFS = \frac{7.5 \text{ hp} \times 6.16}{100' + 2.31(60)} = 0.19 \text{ CFS}$$

F. 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:

$$9 \text{ homes} \times 1.2 = 10.8$$

G. NARRATIVE/REMARKS/COMMENTS

well/pump 7.5 HP red jacket pump and motor to pressure tanks and 9 trailers.
the permit was issued with an inhouse use only. The application for permit didnot request in house only. I would recommend removing the in house use only. Felt requires the trailer park to remove the weeds and maintain a green area around the homes.

9 homes X 1.2af/a= 10.8 af.

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>
DOMESTIC	01/01 to 12/31	0.140 CFS	10.80 AF
<u>Totals:</u>		0.140 CFS	10.80 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 DAVE CARLSON Date 8/13/2004
Reviewer _____ Date _____

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

Office Use Only

Inspected by _____

Twp_____ Rge_____ Sec_____

$$\frac{1}{4} \quad \frac{1}{4} \quad \frac{1}{4}$$

Lat: : : Long: : :

1. DRILLING PERMIT NO. 22-98-E-0028
Other IDWR No. D000460

2. OWNER:
Name C & B Reece LLC
Address P.O. Box 153
City Tetonia State ID Zip 83452

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 6 North 2 or South ☐
 Rge. 45 East 2 or West ☐
 Sec. 6 $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$
10 acres 10 acres 160 acres
 Gov't Lot _____ County KEITH
 Lat. : : Long. : :
 Address of Well Site Felt Town Site
 City _____

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

Lt. _____ Blk. _____ Sub. Name Pierce Trailer Park

4. USE:

☐ Domestic	☐ Municipal	☐ Monitor	☐ Irrigation
☐ Thermal	☐ Injection	☒ Other	<u>Trailer Park Unit</u>

5. TYPE OF WORK check all that apply (Replacement etc.)
☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

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'	20'	900 LBS.	OVER Bore

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"	+1	95'	250"	5' top /	☒	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

10. SPANS WITHIN _____
50' ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or
 control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

_____ Depth first Water Encountered _____

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

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
1 1/2"	0	6'	Clay		X
1 1/2"	6'	20'	Clay Gravel (Sub water)	X	
2"	20'	25'	Clay Gravel	X	
2"	25'	95'	Clay		1
2 1/2"	95'	125'	Rock Gray		
2 1/2"	125'	130'	Brown Rock	X	
2 1/2"	130'	140'	Broken Rock	X	
2 1/2"	140'	155'	Rock Brown		X
2 1/2"	155'	157'	Fractured Rock		X
2 1/2"	157'	180'	Rock		X
2 1/2"	180'	185'	Broken Rock	X	
2 1/2"	185'	210'	Rock		X
2 1/2"	210'	220'	Fractured Rock	X	
2 1/2"	220'	235'	Rock		X
2 1/2"	235'	236'	Fractured Rock	X	
2 1/2"	236'	240'	Rock		X

~~RECEIVED~~

~~JUN 15 1998~~

**Department of Water Resources
Eastern Region**

Completed Depth _____ (Measurable)

Date: Started 5-17-98 Completed 5-18-98

13. DRILLER'S CERTIFICATION

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

Firm Name Denning Drilling, Inc Firm No. 518

Firm Official Samuel S. Stevens Date 5-18-98

and _____
Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

22-7796

POU/POD

TRAILER
PARK





22-7796

DC 8/2004

well / p. tank house