

RECEIVED
JUN 07 2004

15-7260

Department of Water Resources
Eastern Region

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

to appropriate the public waters of the State of Idaho

1. Name of Applicant Kim OR KATHLEEN KERSTETTER Phone 480-987-9287
Mailing address 29204 N. Bryce Trail Queen Creek, AZ. 85242
2. Source of water supply Ground Water which is a tributary of N/A
3. Location of point of diversion is Township 14 S Range 35 E Sec. 10 in the SE $\frac{1}{4}$, SE $\frac{1}{4}$, Govt. Lot ONEIDA B.M., ONEIDA County;
additional points of diversion if any: N/A
4. Water will be used for the following purposes:
Amount .04 for DOMESTIC purposes from JAN 1 to DEC 31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount .02 for STOCK purposes from JAN 1 to DEC 31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount .08 for IRRIGATION purposes from MAY 1 to NOV 15 (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 _____ for _____ purposes from _____ to _____ (both dates inclusive)
(cfs or acre-feet per annum)
5. Total quantity to be appropriated is (a) .08 and/or (b) _____
cubic feet per second acre feet per annum
6. Proposed diverting works:
 - a. Describe type and size of devices used to divert water from the source WELL - 5Hp motor
@ 50 gpm w/ 1 1/2 supply line for SPRINKLERS
 - b. Height of storage dam N/A feet; active reservoir capacity N/A acre-feet; total reservoir capacity N/A acre-feet
 - c. Proposed well diameter is _____ inches; proposed depth of well is _____ feet
 - d. Is ground water with a temperature of greater than 85°F being sought? _____
 - e. If well is already drilled, when? 4-30-99; Drilling firm MOUNTAIN WEST WELL DRILLING;
Well was drilled for (well owner) GLEN EAMES; Drilling Permit No. WELL TAG # D0006615
7. Time required for completion of works and application of water to proposed beneficial use is 5 years (minimum 1 year)
8. Description of proposed uses (if irrigation only, go to item 9):
 - a. Hydropower; show total feet of head and proposed capacity in kW. N/A
 - b. Stockwatering; list number and kind of livestock. 6 HORSES
 - c. Municipal; show name of municipality. N/A
 - d. Domestic; show number of households. ONE
 - e. Other; describe fully. IRRIGATION FOR PASTURE - 4 ACRES

3. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
- b. If water is used for other purposes, place a symbol of the use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RGE	SEC	NE				NW				SW				SE				TOTALS
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
14S	35E	10																4	4
14S	35E	10																S	
14S	35E	10																D	

Total number of acres to be irrigated 4

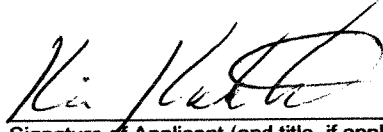
10. Describe any other water rights used for the same purposes as described above. _____

11. a. Who owns the property at the point of diversion? KIM AND KATHLEEN KERSTETTER
- b. Who owns the land to be irrigated or place of use? SAME
- c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing: N/A

12. Remarks: _____

13. **MAP OF PROPOSED PROJECT REQUIRED** - Attach an 8½"x11" map clearly identifying the proposed point of diversion, place of use, section #, township & range. (A photocopy of a USGS 7.5 minute topographic quadrangle map is preferred.)

BE IT KNOWN that the undersigned hereby makes this application for permit to appropriate the public waters of the State of Idaho as herein set forth.


 Signature of Applicant (and title, if applicable)

Received by _____ Date _____ Time _____ Preliminary check by _____
 Fee \$ 100.00 Received by AMA # 5029927 Date 9 June 2004
 Publication prepared by SC Date 7/1/04 Published in Idaho Enterprise
 Publication approved SC Date 8/5/04

N ↑

12M KERSTETTER

LOT 1 SANDRIDGE
PARCEL SUBDIVISION
ONEIDA, COUNTY

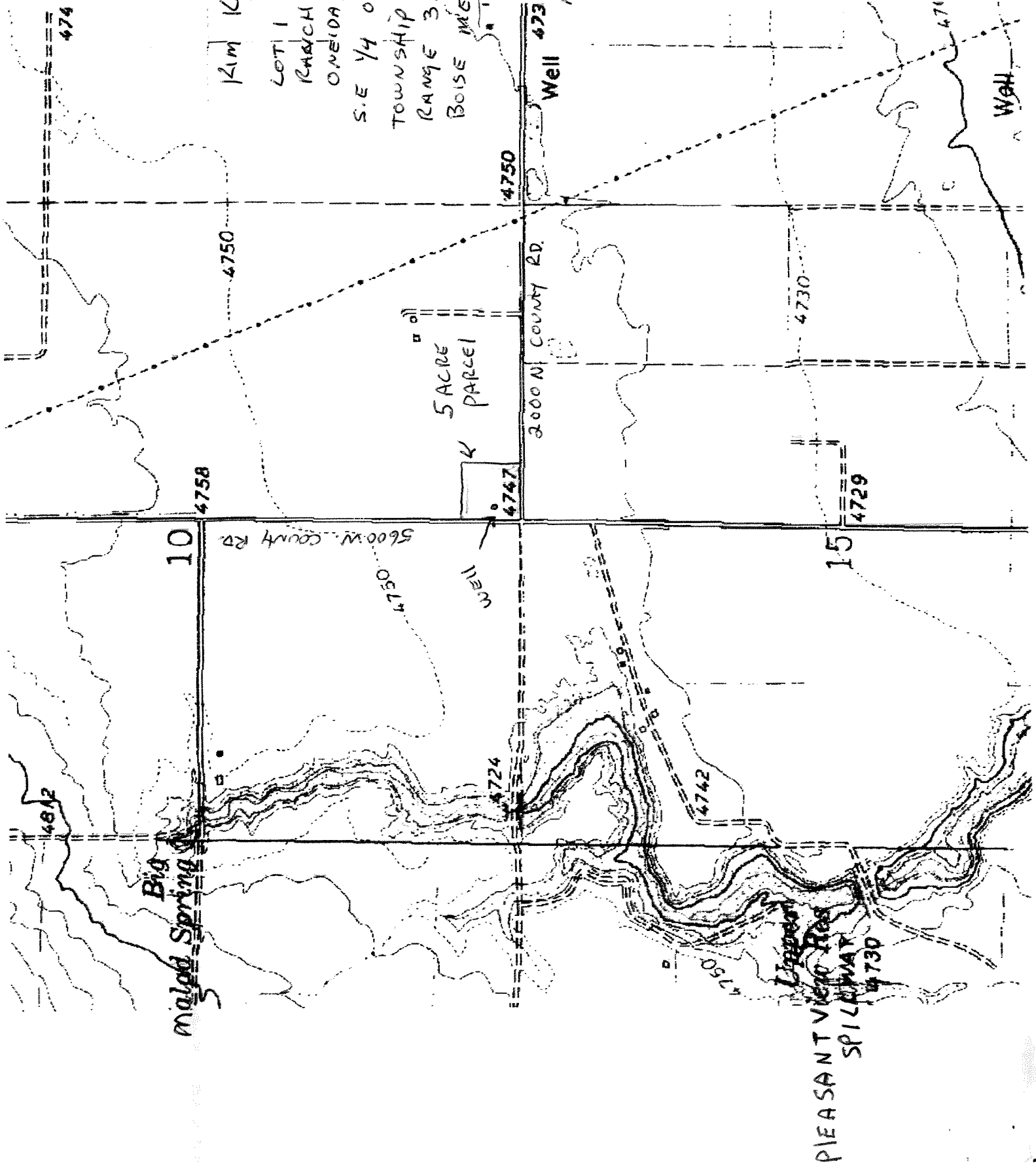
S.E 1/4 OF SECTION 10
TOWNSHIP 14 S.
RANGE 35 E.

BOISE MERIDIAN

5575 W.

2000 N.

MAIAD CITY, ID.



Big
Pleasant View Road

Pleasant View Road
SPILLWAY

WELL DRILLER'S REPORT

WELL TAG NO. D0006615

DRILLING PERMIT NO. _____

Other IDWR No. _____

2. OWNER:

Name Glen E. BakerAddress 173 W 300thCity Malad State ID Zip 83252

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N		Twp. <u>14S</u>		North ☐ or South ☒	
		Rge. <u>35</u>		East ☒ or West ☐	
		Sec. <u>10</u>		1/4 SE 1/4 SE 1/4	
		Gov't Lot _____		County <u>Oneida</u>	
		Lat. _____		Long. _____	

Address of Well Site _____

City Malad

(Name of local name of road - Measure to Road by Landmark)

L. _____ Bk. _____ Sub. Name _____

4. USE:

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

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

Material	From	To	Amount Sacks or Pails	METHOD
Bentonite	0	20	4	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
6"	0	320	32	Steel	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

Perforations _____

Method _____

Screens _____

Screen Type _____

From	To	Obs. Dia.	Number	Diameter	Material	Casing	Liner
250	320	14.0	320	6"	Steel	☒	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

153 ft below ground Artesian pressure _____ lb

Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
50			

Water Temp. cold Bottom hole temp. coldWater Quality test or comments: good

Depth first Water Encounter _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
9"	0	20	Brown clay & gravel		X
6"	20	40	Brown clay & gravel		X
6"	40	50	Brown clay & sand		X
6"	50	90	Gray clay & sand		X
6"	90	100	Gray clay		X
6"	100	120	Gray clay & sand & gravel		X
6"	120	135	Gray clay		X
6"	135	140	Green clay		X
6"	140	150	Brown clay		X
6"	150	180	Gravel & clay		X
6"	180	200	Brown clay		X
6"	200	205	Gravel	X	
6"	205	260	Gravel & clay	X	
6"	260	290	Gravel & clay		X
6"	290	290	Gravel	X	
6"	290	300	Gravel & clay		X
6"	300	320	Gravel	X	

Completed Depth 320 (Measurable)Date: Started 4-22-99 Completed 4-30-99

13. DRILLER'S CERTIFICATION

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

Company Name Mountain West Well Drilling Firm No. 543Firm Official Michael F. Anderson Date 5-11-99and _____
Driller or Operator _____ Date _____

(Sign over to Firm Official or Operator)

This sketch is made solely for the purpose of assisting in locating the premises. The company assumes NO LIABILITY for alleged loss or damage which may result from reliance on this map.
 Note: PLAT MAY NOT BE TO SCALE SHOWN

