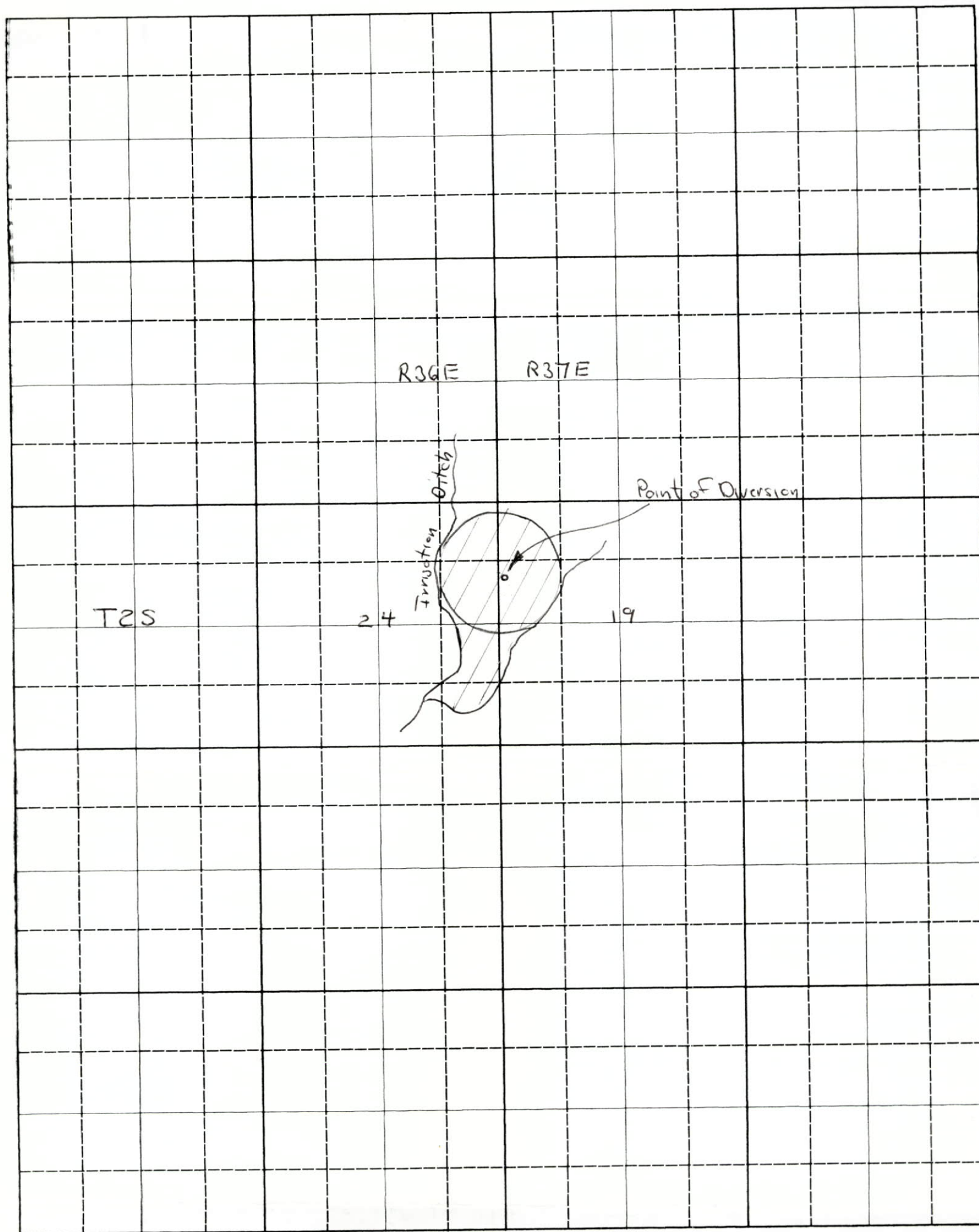


11. Map of proposed project: show clearly the proposed point of diversion, place of use, section number, township and range number.



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.

*Leon A. Adams*  
(Applicant)

T2S

R36+37

E

Sec V-9

Spec V-9

FRANK  
BEAT

164A Total  
140A Total  
24

130A

20

20

PD

38

B

10.5

H

14.9

38

16

3.5

H

8.1

E

6.7

4

36

404 area

Shelly

23

34A

10.0

14.0

34.5

UNFILMED

179A

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**BENEFICIAL USE FIELD REPORT**

**RECEIVED**  
JUN 13 1990  
27-1320  
Department of Water Resources  
684-4458

**A. GENERAL INFORMATION**

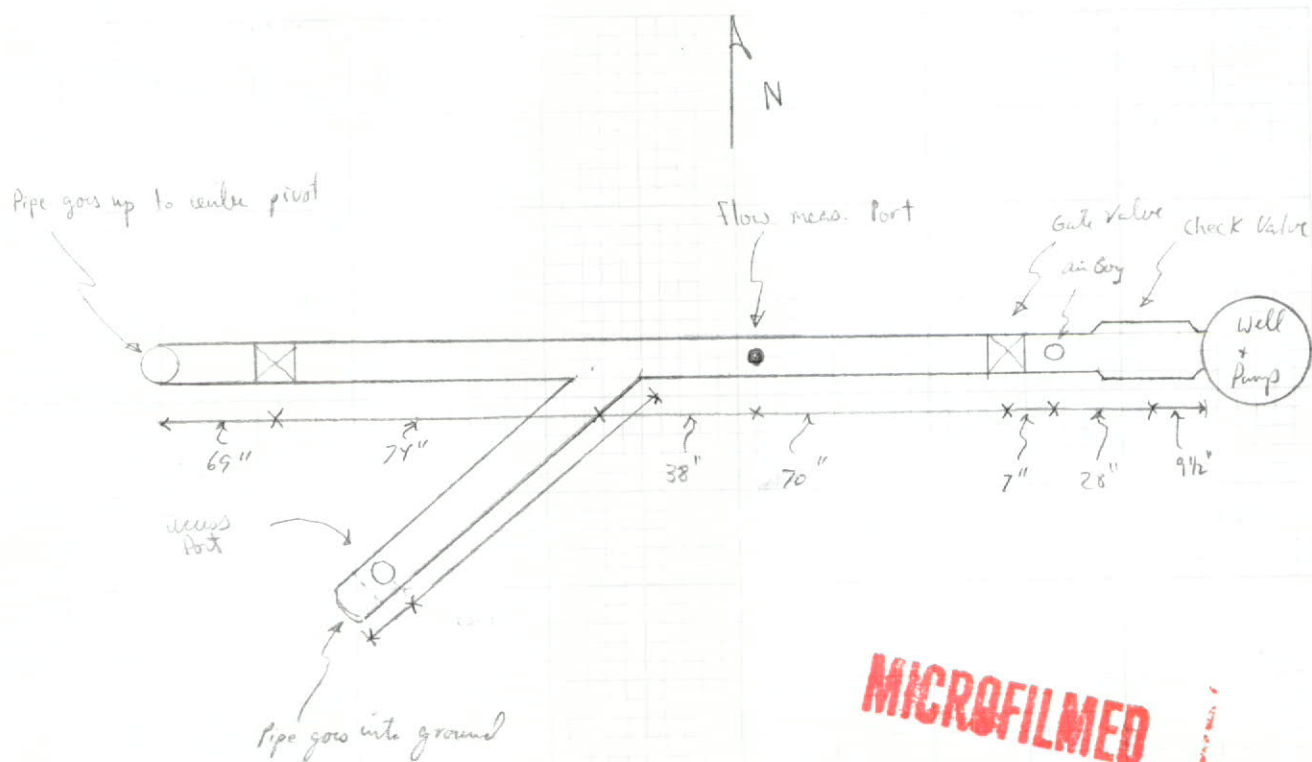
1. Owner: Wray Farms Permit No. 27-1320 Phone No. 684-4458  
Current Address: 960 W. Hwy 26 Blackfoot ID. 83221  
2. Accompanied by: Clark Wray EXAM. DATE: 6-21-89  
Address: 960 W. Hwy. 26 Blackfoot ID. 83221 Phone No. 684-4458  
Relationship to Permit Holder: \_\_\_\_\_  
3. Source: Ground water tributary to \_\_\_\_\_

**B. OVERLAP REVIEW**

1. Other water rights with same place of use: None ☐ Copies Attached  
2. Other water rights with same point of diversion: None ☐ 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



**MICROFILMED**  
JAN 03 1991

Scale: 1" = \_\_\_\_\_

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

R36E

R37E

T 2 S  
R36E R37E

27-7320

23 24

23 24  
26 25

Irrigated  
by  
Center Pivots

Irrigated  
by  
hand lines

Place of Use

0.6 ac.

13.7 ac.

28.3 ac

37.3 ac.

17.1 ac.

15.4 ac.

30 ac.

13.7 ac.

Main line

Point of  
Diversion

MICROFILMED

JAN 03 1999

Waste  
Idle

L-1

L-2

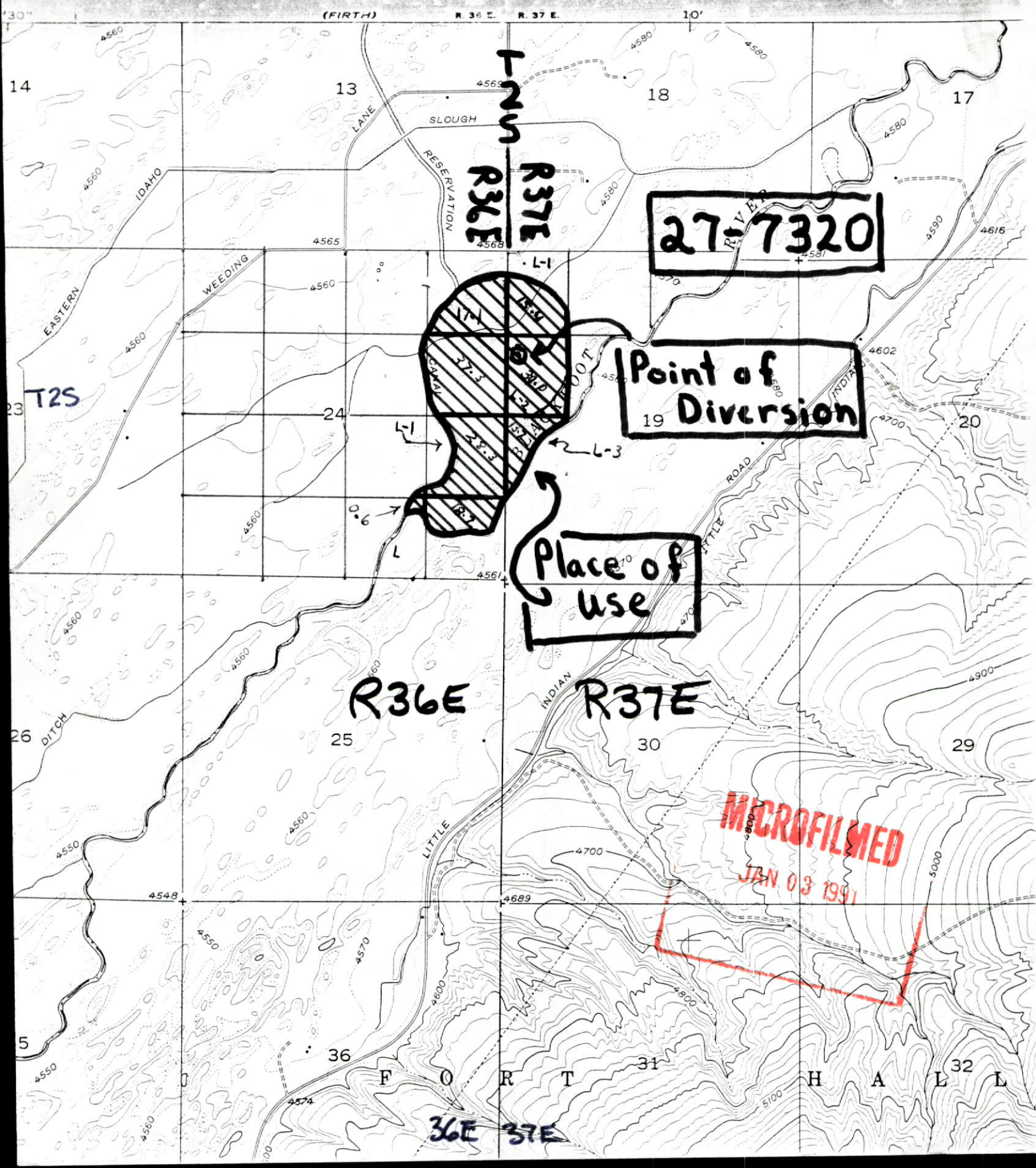
L-3

R36E

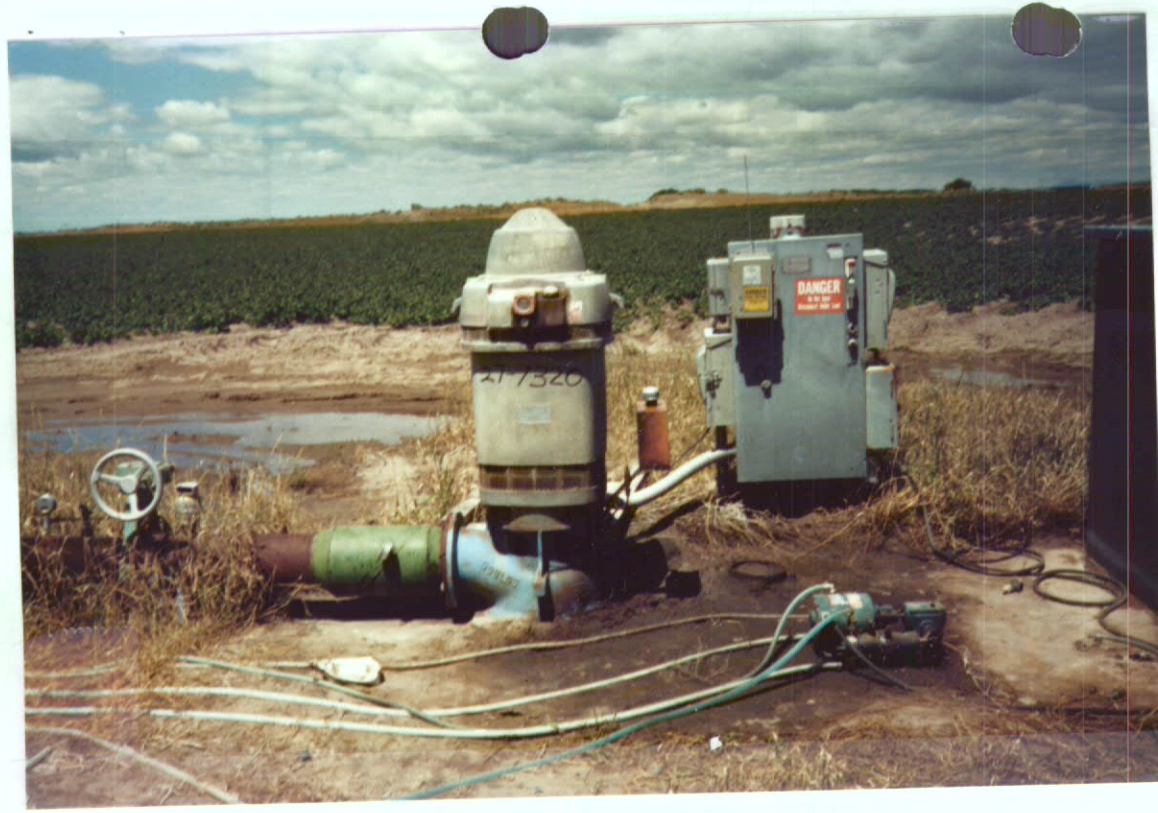
R37E

7-7320

515-41



27-7320



Point of  
Diversion



Flow meas.  
port

27-7320

MICROFILMED

JAN 03 1991

State of Idaho  
Department of Water Resources

# WATER RIGHT LICENSE

WATER RIGHT NO. 27-07320

Priority: July 1, 1982

Maximum Diversion Rate: 2.81 CFS  
Maximum Diversion Volume:<sup>1</sup> 546.4 AF

This is to certify, that WRAY FARMS  
960 W. HWY. 26

BLACKFOOT, ID 83221 has complied with the terms and conditions  
of the permit, issued pursuant to Application for Permit dated June 1, 1982; and  
has submitted Proof of Beneficial Use on April 1, 1983. An examination indicates  
that the works have a diversion capacity of 2.810 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> |
|-----------------------|----------------------|--------------------------|----------------------|
| IRRIGATION            | 03/15 to 11/15       | 2.81 CFS                 | 546.4 AF             |

LOCATION OF POINT(S) OF DIVERSION: SWNW, Sec. 19, Township 02S, Range 37E  
BINGHAM County

PLACE OF USE: IRRIGATION

| <u>TWN</u> | <u>RGE</u> | <u>SEC</u> | <u>ACRES</u> | <u>ACRES</u> | <u>ACRES</u> | <u>TOTAL</u> |
|------------|------------|------------|--------------|--------------|--------------|--------------|
| 02S        | 36E        | 24         | NENE 17.1    | SENE 37.3    | NESE 28.3    | 96.4         |
|            |            |            | SESE 13.7    |              |              | 59.1         |
|            | 37E        | 19         | NWNW 15.4    | SWNW 30      | NWSW 13.7    | 0.6          |
|            |            | 24         | SWSE 0.6     |              |              |              |

Total number of acres irrigated: 156.1

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. This right when combined with all other rights shall provide no more than .02 cfs per acre nor more than 3.5 afa per acre for the lands above.

MICROFILMED

JAN 03 1991

State of Idaho  
Department of Water Resources

**WATER RIGHT LICENSE**

WATER RIGHT NO. 27-07320

CONDITIONS/REMARKS:

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 18<sup>th</sup>  
day of December, 1990.

Acting for

  
R. Keith Higginson, Director

MICROFILMED

JAN 13 1991

State of Idaho  
Department of Water Resources

RECEIVED

NOV 30 1990

APPLICATION FOR AMENDMENT  
(For Licensing Purposes)  
WATER RIGHT NO. 27-07320

Date of Priority: July 1, 1982

Maximum Diversion Rate: 2.81 CFS  
Maximum Diversion Volume: 546.4 AF

Comes now  
960 W. HWY. 26  
BLACKFOOT, ID 83221

WRAY FARMS

and represents to the Director of the

Idaho Department of Water Resources:

That he is the owner and holder of Permit to Appropriate the Public Waters of the State of Idaho No. 27-07320, and requests that the permit be changed as follows:

Source: GROUNDWATER

| <u>BENEFICIAL USE</u> | <u>PERIOD OF USE</u> | <u>RATE OF DIVERSION</u> | <u>ANNUAL VOLUME</u> |
|-----------------------|----------------------|--------------------------|----------------------|
| IRRIGATION            | 03/15 to 11/15       | 2.81 CFS                 | 546.4 AF             |

LOCATION OF POINT(S) OF DIVERSION:

SWNW , Sec. 19, Township 02S, Range 37E  
BINGHAM County

PLACE OF USE: IRRIGATION

| <u>TWN RGE SEC</u> | <u>ACRES</u> | <u>ACRES</u> | <u>ACRES</u> | <u>TOTAL</u> |
|--------------------|--------------|--------------|--------------|--------------|
| 02S 36E 24         | NENE 17.1    | SENE 37.3    | NESE 28.3    | 96.4         |
|                    | SESE 13.7    |              |              | 59.1         |
| 37E 19             | NWNW 15.4    | SWNW 30      | NWSW 13.7    | 0.6          |
| 24                 | SWSE 0.6     |              |              |              |

Total number of acres irrigated: 156.1

Permit holder asserts that no one will be injured by such change and that such change will be made at permit holder's own risk.

Signed at Blackfoot, this 26 day of November, 1990.

MICROFILMED

JAN 13 1991

JM Wray  
(Signature)

State of Idaho  
Department of Water Resources

APPLICATION FOR AMENDMENT  
(For Licensing Purposes)  
WATER RIGHT NO. 27-07320

\*\*\*\*\*

FOR DEPARTMENT USE ONLY

#C019005

Preliminary check by SC Fee \$ \$20.00

Received by J2 Date 11/30/90

ACTION OF THE DEPARTMENT OF WATER RESOURCES

I, R. Keith Higginson, of the Department of Water Resources hereby approve the above Application for Amendment for Permit No. 27-07320 with the following;

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. This right when combined with all other rights shall provide no more than .02 cfs per acre nor more than 3.5 afa per acre for the lands above.

Witness my hand this 18<sup>th</sup> day of

December, 19 90

Acting for

R. Keith Higginson

R. Keith Higginson, Director

RECORDED

JAN 03 1991

WATER RIGHT SPLIT  
SUMMARY

| ACTION          | RIGHT NO. | NAME                        | AMOUNT CFS |
|-----------------|-----------|-----------------------------|------------|
| Orginial Permit | 27-7320   | Leon Dance &/or Jiro Yamata | 3.16 cfs   |
| Full Assignment | 27-7320   | Wray Farms                  | 3.16 cfs   |

11-11-11

State of Idaho  
Department of Water Resources

OK to proceed  
RC 8-18-83

ASSIGNMENT OF PERMIT

I, John Yamada, hereby assign to Wray Farm  
of Route # 4 Box 286, Blackfoot, Idaho.  
Address

CHECK ONE

☐ All my right, title, and interest in and to Permit No. 27-7320  
to appropriate the public waters of the State of Idaho.

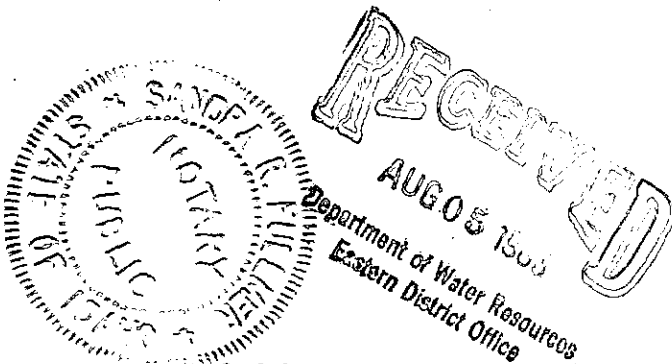
☐ The following described portion of my right, title, and interest in and to Permit  
No. \_\_\_\_\_ to appropriate the public waters of the State of Idaho.

(Describe that portion of the permit being assigned by listing the acreage within  
each 40 acre subdivision, the point of diversion and the amount of water in cubic  
feet per second for direct diversion, or acre-feet for storage)

Made this 29th day of July, 19 83.

John Yamada  
Permit Holder

\_\_\_\_\_  
Spouse of Permit Holder



State of Idaho )

County of Bingham ) ss.

On this 29 day of July, 19 83, personally  
appeared before me the signer(s) of the above instrument, who duly acknowledged to me  
that he (she) (they) executed the same.

Sandra R. Fullmer  
Notary Public residing at  
252 Elm St. Bluff Id.

My commission expires:

June 1 - 1987

RECEIVED

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
APPLICATION FOR PERMIT

**APPROVED**

To appropriate the public waters of the State of Idaho

1. Name of applicant LEON DANCE &/or JIRO YAMATA Phone 785-3752

Post office address 599 McAdoo Blackfoot, Idaho 83221

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

3. Location of point of diversion is SW  $\frac{1}{4}$  of NW  $\frac{1}{4}$  of Section 19 Township 2S

Range 37E B.M. Bingham County, additional points of diversion if any: \_\_\_\_\_

4. Water will be used for the following purposes:

Amount 3.16 cfs for Irrigation purposes from 3/15 to 11/15 (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:

a. 3.16 cfs cubic feet per second and/or b. \_\_\_\_\_ acre-feet per annum.

6. Proposed diverting works:

a. Description of ditches, flumes, pumps, headgates, etc. Well to center pivot and wheel lines

b. Height of storage dam \_\_\_\_\_ feet, active reservoir capacity \_\_\_\_\_ acre-feet; total reservoir capacity \_\_\_\_\_ acre-feet, materials used in storage dam: \_\_\_\_\_

Period of year when water will be diverted to storage \_\_\_\_\_ to \_\_\_\_\_ inclusive.  
(Month/Day) (Month/Day)

c. Proposed well diameter is 16 inches; proposed depth of well is 100 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: \_\_\_\_\_  $\frac{1}{4}$  of \_\_\_\_\_  $\frac{1}{4}$  of Section \_\_\_\_\_ Township \_\_\_\_\_  
Range \_\_\_\_\_ B.M.

(2) Amount of power to be generated: \_\_\_\_\_ horsepower under \_\_\_\_\_ feet of head.

(3) List number of each kind of livestock to be watered \_\_\_\_\_

(4) Name of municipality to be served \_\_\_\_\_, or number of families to be supplied with domestic water \_\_\_\_\_

(5) If water is to be used for other purposes describe: \_\_\_\_\_

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 |        |
| 2S  | 36E   | 24   | 20  |     |     | 38  |     |     |     |     |     |     |     |     | 27  |     |     | 11  | 96     |
| 2S  | 37E   | 19   |     |     |     |     |     | 20  | 38  |     |     | 4   |     |     |     |     |     |     | 62     |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |
|     |       |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |        |

Total number of acres to be irrigated 158

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

9. a. Who owns the property at the point of diversion APPLICANTS

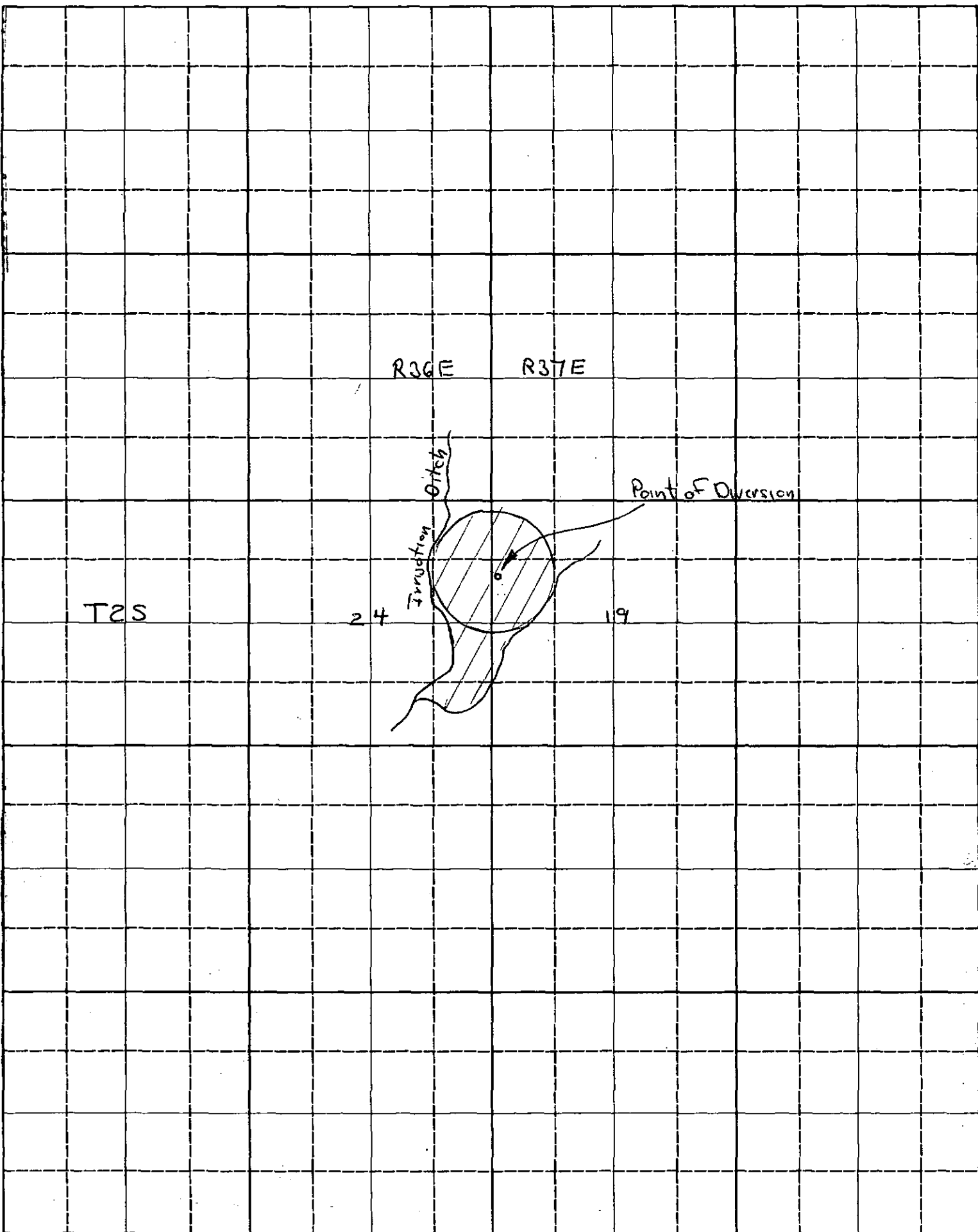
b. Who owns the land to be irrigated or place of use APPLICANTS

c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing

10. Remarks

MICROFILMED

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.

*[Signature]*  
(Applicant)

Proposed Priority 6/01/1982

Assisted by HWT  
Received by CW

Date 6-01-82 Time 10:45 A.

Preliminary check by KCW Fee \$ 105.00

Received by BP Date 6-2-82 # 22289

Publication prepared by BP Date 6-3-82

Published in Blackfoot News

Publication dates 6-10 & 6-17-1982

Publication approved CW Date 6-29-82

Protests filed by: None

Copies of protests forwarded by \_\_\_\_\_

Hearing held by \_\_\_\_\_ Date \_\_\_\_\_

Recommended for approval denial by EMC RC

#### 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. 27-7320, 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 August 1, 19 83.

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: An access port or other device as specified by the Department shall be installed by the permit holder to provide for the installation of measuring equipment and the determination of the rate of diversion by the Department.

Owner shall submit a copy of the well log on or before the proof due date.

The Director retains jurisdiction of the permit to determine potential interference with surface water flows in the Blackfoot River.

Witness my hand this 26<sup>th</sup> day of July, 1982.

L. Glen Saxton  
Chief, Operations Bureau

RECEIVED  
JUL 10 1982

T2S  
R36+37  
E

See

Sheet V. 9

164A Total  
140A Total  
24

130A

130A

Bank  
P.L.K.

20

20

PO

35

130

149

10.5

38

16

4

34

4

36

40 ft area

Shelly

23

34A

179A

1000

1000

440

JUN 28 1982

Department of Water Resources  
Eastern District Office

**NOTICE OF APPLICATION  
FOR WATER RIGHT**

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

27-7319

RBY, Donald E.  
15 West Fir  
Shelley, Id. 83274  
Source: GROUNDWATER  
Date Filed: 05/26/1982  
Amount: 0.63 CFS  
Diversion Point: SWSW, Sec. 11,  
T. 02S, R. 36E, Bingham Co.  
Use: IRRIGATION (0.63 CFS) from  
04/01 to 11/01  
Place of Use: NWSW SWSW, Sec.  
T. 02S, R. 36E, for 32 ACRES.  
Diversion Means: WELL, PUMP &  
SPRINKLER.

27-7320

DANCE, Leon  
AMATA, Jiro  
99 McAdoo  
Blackfoot, Id. 83221  
Source: GROUNDWATER  
Date Filed: 06/01/1982  
Amount: 3.16 CFS  
Diversion Point: SWNW, Sec. 19,  
T. 02S, R. 37E, Bingham Co.  
Use: IRRIGATION (3.16 CFS) from  
04/15 to 11/05  
Place of Use: NENE SENE NESE  
SESE, Sec. 24, T. 02S, R. 36E,  
SWNW SWNW NWSW, Sec. 19, T.  
02S, R. 37E, for 158 ACRES.  
Diversion Means: WELL, PIVOT &  
WHEEL LINES.

27-7321

L.D.S. Church  
Basalt Ward,  
Firth Stake  
Rt. 2 Box 63  
Shelley, Id. 83274  
Source: GROUNDWATER  
Date Filed: 06/02/1982  
Amount: 0.60 CFS

Diversion Point: SWSE, Sec. 18, T.  
01S, R. 37E, Bingham Co.  
Use: IRRIGATION (0.60 CFS) from  
04/01 to 11/01  
Place of Use: SWSE, Sec. 18, T.  
01S, R. 37E, for 30 ACRES.  
Diversion Means: WELL, PUMP &  
SPRINKLER.

35-8038

CORNIA, C. Dean  
6527 Holiday Drive  
Boise, Id. 83709  
Source: GROUNDWATER  
Date Filed: 05/27/1982  
Amount: 0.14 CFS  
Diversion Point: NENW, Sec. 33,  
T. 02S, R. 34E, Bingham Co.  
Use: IRRIGATION (0.10 CFS) from  
04/01 to 11/01  
DOMESTIC (0.04 CFS) from 01/01  
to 12/31  
Place of Use: NENW, Sec. 33, T.  
02S, R. 34E, for 5 ACRES.  
Diversion Means: WELL, PUMP,  
MAINLINE TO HANDLINES.

If issued, the permit(s) will be sub-  
ject 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, 150 Shoup Ave., Idaho  
Falls, Idaho, 83402, on or before

JUNE 28, 1982

A. KENNETH DUNN  
Director

(7348)  
Pub.: 6-10, 17

**AFFIDAVIT of PUBLICATION**

County of Bingham )

State of Idaho ) ss

I, David Mark Brown do  
solemnly

Publisher

swear that I am the Publisher of  
The Morning News which is a daily newspaper of general  
circulation published each day except Sunday at  
Blackfoot, Bingham County, Idaho, said newspaper hav-  
ing been so published at Blackfoot, aforesaid for more  
than one year past; that said newspaper heretofore com-  
plied with all the provisions of Chapter 154 of the Ses-  
sions Laws of Idaho of 1933, approved March 11, 1933,  
and duly designated, pursuant to law, a particular day of  
the week as the day on which legal notices required by  
law or by the order of any Court of competent jurisdiction  
within the State of Idaho shall be published to-wit: Thursdays  
of each week; that the notice attached hereto and which  
is a part of this affidavit and part of the proof of  
publication was published in said issue or said  
newspaper (2) two consecutive weeks

the first publication having been made on the  
10th day of June, 19 82,

and the last publication having been made on the  
17th day of June, 19 82

that said notice was published in the regular and entire  
issue of every number of the paper as aforesaid during  
the period and time of publication, and that notice was  
published in the newspaper and not in a supplement.

A. Kenneth Dunn

Subscribed and sworn to before me this 23rd

day of June, 19 82

Patricia A. Johnson

Notary Public for the State of Idaho,

Residing at Blackfoot, Idaho

My commission expires

Oct. 20, 1984

MICROFILMED

27-7320

PANCF, Leon

Adm. Div. 11a

99 SW Adoo

Blackfoot, Id. 83221

Source: GROUNDWATER

Date Filed: 06/01/1982

Amount: 3.16 CFS

Diversion Point: SWNW, Sec. 19

T. 02S, R. 37E, Bingham Co.

Use: IRRIGATION (3.16 CFS) from

03/15 to 11/15

Place of Use: VENE SEVENTH'S

SE 1/4 Sec. 24 T. 02S, R. 36E

NW 1/4 SWNW NWSW Sec. 19

02S, R. 37E 105.58 ACRES.

Means: WELL P.V.C.T.

FMHC

December 19, 1990

WRAY FARMS  
960 W. HWY. 26  
BLACKFOOT, ID 83221

RE: WATER RIGHT NO. 27-07320

Dear Water Right Holder(s):

Enclosed herewith is a copy of the Water Right License issued on the above referenced permit along with a copy of your approved application for amendment.

Should you have any questions regarding these documents, please feel free to contact our office.

Sincerely,

JIM JOHNSON  
Water Rights Supervisor

JJ:blm

Enclosure

MICROFILMED

JAN 03 1991

November 1, 1990

WRAY FARMS  
960 W. HWY. 26  
BLACKFOOT, ID 83221

RE: WATER RIGHT NO. 27-07320

Dear Water Right Holder(s):

The above referenced water right is in the process of being licensed. However, before a license can be issued, your permit must be amended to correspond with the findings of the Department's field examiner.

The enclosed application for amendment contains information that will be included on the license when it is issued. Please review carefully and if you concur, sign the amendment and return with the \$20.00 filing fee within 30 days.

Please note that the date of priority of this right has been advanced due to late submittal of the examination fee &/or exam fee information sheet.

If you do not concur with these findings or if you have any questions, please contact us within the 30-day period.

Sincerely,

JIM JOHNSON  
Water Rights Supervisor

JJ:blm

Enclosure

INDEXED  
JAN 03 1991

# LICENSE REVIEW CHECKLIST

Permit No. 27-7320

Name Address change? ok

Priority date Advance? yes no

Memo to advance ok

Blue sheet inserted ok

Order to reinstate needed? yes no ok

Total cfs Limited by fee 3.16 ok

Limited by capacity ok

Total volume Limited by flow ok

Chart checked for AF rate/ac ok 3.5 x 156.1 AC =

Capacity Actual measurement checked ok 546.4 AFA

Theoretical checked ok

If greater than permit, check for other rts ok

Source Changed? yes no  
If so, is memo needed to clarify? ok

P/D Verify with map ok permit ok  
More than one per 1/4? Remember remark ok  
Check p/d overlap

Uses Check irrigation period of use w/ chart ok

P/U Verify with map ok permit ok SWSE, 524 added -  
> 5 acres irrigated, run overlap amendment  
needed

Remarks More than one p/d in 1/4 ok  
Description of non-irrig uses ok  
Special overlap condition ok

Conditions Measuring device ok  
W.Master control ok  
Overlap 30  
Water quality ok  
Other ok

Dates/Misc Water district ok  
App Rec'd date ok  
Proof Rec'd date ok

Comments/Changes to Examiner's Recommendations:

License ok 10-day ok 30-day ok

Back of field report signed? ok

Reviewer S. Curtis Date 10-16-90  
Review time 12 minutes

WR0722NP  
(0D-22)

IDAHO DEPARTMENT OF WATER RESOURCES  
WATER RIGHTS BY POINT OF DIVERSION

DATE: 10/18/90  
PAGE: 1

| TWP | RNG | SECT | TRACT | LOT | WATER USE CODE | WATER RIGHT NO. | LAST NAME  | O | STG | PRIORITY DATE | POD FLAG | WATER SOURCE |
|-----|-----|------|-------|-----|----------------|-----------------|------------|---|-----|---------------|----------|--------------|
| 02S | 37E | 19   | SW NW | 01  |                | 27-07320        | DANCE      | O | P   | 06/01/1982    |          | GROUNDWATER  |
|     |     |      |       |     |                |                 | YAMATA     | O |     |               |          |              |
|     |     |      |       |     |                |                 | WRAY FARMS | C |     |               |          |              |

NO 7/D  
OVERLAP  
NO 7/u  
OVERLAP

BENEFICIAL USE FIELD REPORT REVIEW

TO: FILE 27-7320

FROM: JIM JOHNSON

RE: PRIORITY ADVANCE REVIEW

DATE: 16-OCT-1990

=====

This review memo is prepared to show the process for determining what elements were involved in advancement of the priority.

|                                    | <u>DATE</u>   | <u>JULIAN</u> |
|------------------------------------|---------------|---------------|
| <b>PERMIT</b>                      |               |               |
| Permit priority Date:              | JUNE 01 1982  | 152           |
| <b>EXAM FEE NOTICE</b>             |               |               |
| Exam Fee Notice Date:              | APRIL 17 1986 | 107           |
| Exam Fee/Info Sheet Received Date: | JULY 15 1986  | 196           |
| Exam Fee or Info Due Date:         | JUNE 16 1986  | 167           |
| Days Late:                         |               | 29 DAY(S)     |
| <b>NEW PRIORITY DATE</b>           |               |               |
| Original Priority Date:            | JUNE 01 1982  | 152           |
| Total Days Late:                   |               | 29 DAY(S)     |
| New Priority Date:                 | JULY 01 1982  | 181           |

RECEIVED

JAN 03 1991

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES

Staff Analysis Sheet  
for  
Beneficial Use Field Report

27-7320  
Permit No.  
EB 1013486

A. Prior to Conducting the Exam, the File Contains:

- ☒ Blank Field Report Form
- ☒ Copy of Permit
- ☒ Copies of any Amendments/Orders with conditions of approval
- ☒ Computer Data Proof Report
- ☒ Copy of U.S.G.S. Quad
- ☒ Check for Government Lots. If so, make a copy of Government Plat

Check of P/D index KW 31 MAR 87 (Initial and date)

Overlap? ☐ yes ☒ no If yes: ☐ copy of exam(s) attached?  
Type of Overlap? ☐ Add acres or uses to existing system  
☐ Increase rate of flow or volume  
☐ Other: \_\_\_\_\_

Check of P/U index KW 31 MAR 87 (Initial and date)

Overlap? ☐ yes ☒ no If yes: ☐ copy of water right(s) attached?  
Type of Overlap? ☐ Increase rate of flow or volume  
☐ Add P/D's  
☐ Increase number of acres within tracts  
☐ Other: 27-7307/7308

Aerial Photo

Required? ☒ yes ☐ no If yes: ☒ copy attached?

Scheduling Letter sent? \_\_\_\_\_ (Initial and date)

☐ Appointment made and telephone conversation memo attached

B. After Conducting the Exam, the File Contains:

- ☐ Fully completed and signed Field Report Form
- ☐ Photographs of Point of Diversion and Place of Use
- ☐ Corrected Computer Data Proof Report with recommended license information, and date and signature of examiner.

C. Review and Processing:

Exam Completed 6-21-89 KW (Signature of examiner and date)

Exam Reviewed by Senior Water Resource Agent 8/10/89 KW (Initial and date)

Exam Reviewed by Manager of Regional Office \_\_\_\_\_ (Initial and date)

Exam Date Entered in Computer \_\_\_\_\_ (Initial and date)

Exam sent to State Office \_\_\_\_\_ (Initial and date)

Copy of Staff Analysis Sheet sent to Manager of Regional Office and Original  
Refiled in White File \_\_\_\_\_ (Initial and date)

DIRECTIONS:

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**BENEFICIAL USE FIELD REPORT**

**RECEIVED**  
JUN 13 1990  
27-1320  
Department of Water Resources  
Permit No. 684-4458

**A. GENERAL INFORMATION**

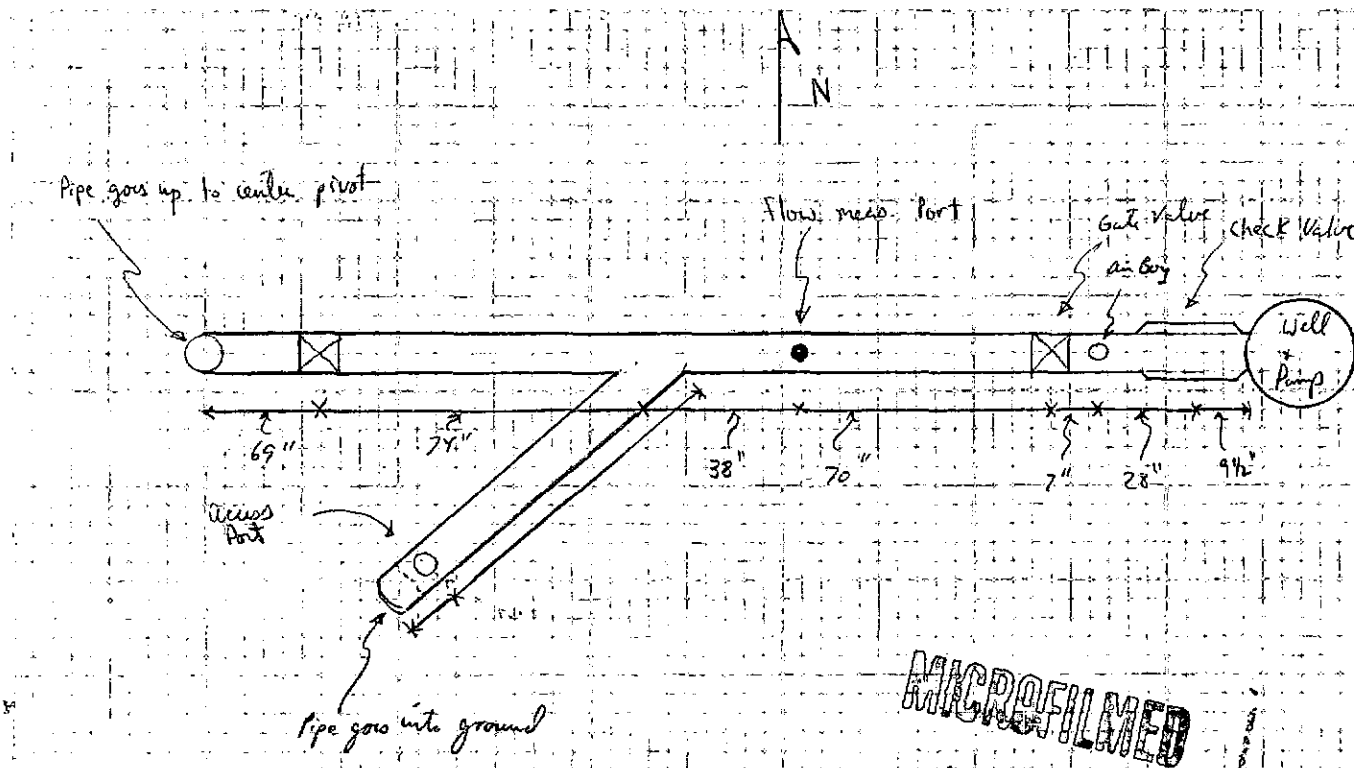
1. Owner: Wray Farms  
Current Address: 9600 W. Hwy 26 Blackfoot ID. 83221  
Phone No. 684-4458
2. Accompanied by: Clark Wray  
Address: 9600 W. Hwy. 26 Blackfoot ID. 83221  
Phone No. 684-4458  
EXAM. DATE: 6-21-89  
Relationship to Permit Holder: \_\_\_\_\_
3. Source: Ground water tributary to \_\_\_\_\_

**B. OVERLAP REVIEW**

1. Other water rights with same place of use: None  
\_\_\_\_\_ ☐ Copies Attached
2. Other water rights with same point of diversion: None  
\_\_\_\_\_ ☐ 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" = \_\_\_\_\_

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

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**System Description (continued)**

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

Well & pump to

- 1 - 8 tower center pivot with end gun. (low pressure)
- 2 - 3 tower center pivots with end guns (low pressure)

Low pressure systems

Handlines irrigate corners + odd pieces that aren't in the circles. These handlines are run when the 2-3 tower pivots are off. System is at full capacity at measurement time.

Water level about 60'  $\approx$  30' in August

☐ See Remarks on page 4 for continuation

- | Well or Diversion Identification No.* | Motor Make    | Hp  | Motor Serial No. | Pump Make | Pump Serial No. or Discharge Size |
|---------------------------------------|---------------|-----|------------------|-----------|-----------------------------------|
|                                       | U.S. Electric | 100 | R-6374-03-222    | GOULDS    | ≈ 8"                              |
|                                       |               |     |                  |           |                                   |
|                                       |               |     |                  |           |                                   |
|                                       |               |     |                  |           |                                   |

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

- 5. Point(s) of Diversion:**

[illegible]

- 6. Place(s) of Use:**

**Indicate Method of Determination**

| Twp. | Rge. | Sec. | NE¼  |     |     |      | NW¼  |      |     |     | SW¼ |      |     |      | SE¼ |     |      |      | Totals |
|------|------|------|------|-----|-----|------|------|------|-----|-----|-----|------|-----|------|-----|-----|------|------|--------|
|      |      |      | NE¼  | NW¼ | SW¼ | SE¼  | NE¼  | NW¼  | SW¼ | SE¼ | NE¼ | NW¼  | SW¼ | SE¼  | NE¼ | NW¼ | SW¼  | SE¼  |        |
| 2S   | 36E  | 24   | 17-1 |     |     | 37-3 |      |      |     |     |     |      |     | 28-3 |     | 0-6 | 13-7 | 97   |        |
| 2S   | 37E  | 19   |      |     |     |      | 15-4 | 30-0 |     |     |     | 13-7 |     |      |     |     |      | 59.1 |        |
|      |      |      |      |     |     |      | L-1  | L-2  |     |     |     | L-3  |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
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|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
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|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
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|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
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|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
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|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
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|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
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|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |
|      |      |      |      |     |     |      |      |      |     |     |     |      |     |      |     |     |      |      |        |

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**Do not use this space**

JAN 03 1991

Do not use this space

## D. FLOW MEASUREMENTS

☐ Additional Data Sheets Attached

1.

| Measurement Equipment | Type  | Make | Model No. | Serial No. | Size | Calib. Date |
|-----------------------|-------|------|-----------|------------|------|-------------|
| Halls Meter           | Pitot | Cox  |           | 120387     | 8"   |             |
| Manometer             | -     | IDWR | -         | -          | 57"  |             |
|                       |       |      |           |            |      |             |
|                       |       |      |           |            |      |             |

2. Measurements:

I.D. = 7.75"

Pressure = 44 psi

Manometer =  $30.8 - 1.6 = 29.2$   $V_H = 26.7$

## E. FLOW CALCULATIONS

☒ Additional Computation Sheets Attached

1. Measured Method:

See Calc. Sheet  $Q = 2.81$  cfs

2. Alternate Method for Checking Purposes:

See Calc. Sheet  $Q = 4.87$  cfs

## 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:

$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = (156.1 \times 2.5) = 390.3 \text{ cfs}$

$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = (2.81 \times 245 \times 1.9835) = 1365.5$

$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 390.3 \text{ cfs}$

2. Volume Calculations for Other Uses:

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## H. REMARKS AND OVERLAP REVIEW ANALYSIS

*No Overlap*

*0.6 acres in SW SE sect. 15 needs added for place of use.*

## I. RECOMMENDATIONS

### 1. Recommended Amounts

| Beneficial Use    | Period of Use |              | Rate of Diversion<br>Q (cfs) | Annual Volume<br>V (afa) |
|-------------------|---------------|--------------|------------------------------|--------------------------|
|                   | From          | To           |                              |                          |
| <i>Irrigation</i> | <i>3/15</i>   | <i>11/15</i> | <i>2.81</i>                  | <i>343 590.3</i>         |
|                   |               |              |                              |                          |
|                   |               |              |                              |                          |
|                   |               |              |                              |                          |
| Totals:           |               |              | <i>2.81</i>                  | <i>343 590.3</i>         |

### 2. Recommended Amendments

- |                                                         |                                                                 |                                |
|---------------------------------------------------------|-----------------------------------------------------------------|--------------------------------|
| <input type="checkbox"/> Change P.D. as reflected above | <input type="checkbox"/> Add P.D. as reflected above            | <input type="checkbox"/> None  |
| <input type="checkbox"/> Change P.U. as reflected above | <input checked="" type="checkbox"/> Add P.U. as reflected above | <input type="checkbox"/> Other |

## J. AUTHENTICATION

Field Examiner's Name *Kelly Schild*

Signature *Kelly Schild*

Certification Date \_\_\_\_\_

Field Report Preparation Date *8-3-89*

CONSULTANT SEAL

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

*10-16-90  
SC*

**MICROFILMED**

**JAN 03 1991**

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
LICENSING REPORT

27-7320

PERMIT NO.

MANOMETER READING TO HALLS Vh

$$Q_{cfs} = \frac{11 (id)^2}{4} (V_h) / 448.8$$

$$id = 7.75 \quad V_h = 26.7$$

$$Q = \frac{0.78539 (7.75)^2 (26.7)}{448.8}$$

$$Q = 2.81 \text{ cfs}$$

$$Q = \frac{L_p (8.814) (e_{ff})}{\text{lift} + (2.308 \times \text{psi})}$$

$$= \frac{100 (8.814) (.8)}{50 + (2.308 \times 41)}$$

$$= 4.87 \text{ gpm (Theoretical)}$$

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|    | .0   | .1   | .2   | .3   | .4   | .5   | .6   | .7   | .8   | .9   |
|----|------|------|------|------|------|------|------|------|------|------|
| 0  | 0.0  | 0.8  | 1.3  | 1.8  | 2.2  | 2.5  | 2.9  | 3.3  | 3.7  | 4.0  |
| 1  | 4.3  | 4.5  | 4.8  | 5.0  | 5.2  | 5.4  | 5.6  | 5.8  | 6.0  | 6.2  |
| 2  | 6.3  | 6.5  | 6.7  | 6.9  | 7.0  | 7.2  | 7.3  | 7.5  | 7.6  | 7.7  |
| 3  | 7.9  | 8.0  | 8.2  | 8.3  | 8.5  | 8.6  | 8.7  | 8.8  | 9.0  | 9.1  |
| 4  | 9.3  | 9.4  | 9.5  | 9.6  | 9.7  | 9.8  | 10.0 | 10.1 | 10.2 | 10.3 |
| 5  | 10.4 | 10.5 | 10.6 | 10.7 | 10.9 | 11.0 | 11.1 | 11.2 | 11.3 | 11.4 |
| 6  | 11.5 | 11.6 | 11.7 | 11.8 | 11.9 | 12.0 | 12.1 | 12.2 | 12.3 | 12.4 |
| 7  | 12.5 | 12.6 | 12.7 | 12.8 | 12.9 | 13.0 | 13.1 | 13.2 | 13.3 | 13.4 |
| 8  | 13.5 | 13.5 | 13.6 | 13.7 | 13.8 | 13.9 | 14.0 | 14.0 | 14.1 | 14.2 |
| 9  | 14.3 | 14.4 | 14.5 | 14.5 | 14.6 | 14.7 | 14.8 | 14.9 | 15.0 | 15.0 |
| 10 | 15.1 | 15.2 | 15.3 | 15.4 | 15.5 | 15.5 | 15.6 | 15.7 | 15.8 | 15.9 |
| 11 | 15.9 | 16.0 | 16.1 | 16.2 | 16.3 | 16.3 | 16.4 | 16.5 | 16.5 | 16.6 |
| 12 | 16.7 | 16.7 | 16.8 | 16.9 | 17.0 | 17.0 | 17.1 | 17.2 | 17.3 | 17.3 |
| 13 | 17.4 | 17.5 | 17.5 | 17.6 | 17.7 | 17.8 | 17.8 | 17.9 | 18.0 | 18.1 |
| 14 | 18.1 | 18.2 | 18.3 | 18.3 | 18.4 | 18.5 | 18.5 | 18.6 | 18.7 | 18.7 |
| 15 | 18.8 | 18.9 | 18.0 | 19.0 | 19.1 | 19.1 | 19.2 | 19.3 | 19.3 | 19.4 |
| 16 | 19.5 | 19.5 | 19.6 | 19.6 | 19.7 | 19.7 | 19.8 | 19.9 | 19.9 | 20.0 |
| 17 | 20.1 | 20.1 | 20.2 | 20.2 | 20.3 | 20.4 | 20.4 | 20.5 | 20.5 | 20.6 |
| 18 | 20.7 | 20.7 | 20.8 | 20.9 | 20.9 | 21.0 | 21.0 | 21.1 | 21.2 | 21.2 |
| 19 | 21.3 | 21.3 | 21.4 | 21.4 | 21.5 | 21.6 | 21.6 | 21.7 | 21.7 | 21.8 |
| 20 | 21.9 | 21.9 | 22.0 | 22.0 | 22.1 | 22.2 | 22.2 | 22.3 | 22.3 | 22.4 |
| 21 | 22.4 | 22.5 | 22.5 | 22.6 | 22.6 | 22.7 | 22.7 | 22.8 | 22.9 | 22.9 |
| 22 | 23.0 | 23.0 | 23.1 | 23.1 | 23.2 | 23.2 | 23.3 | 23.4 | 23.4 | 23.5 |
| 23 | 23.5 | 23.6 | 23.6 | 23.7 | 23.7 | 23.8 | 23.8 | 23.9 | 23.9 | 24.0 |
| 24 | 24.0 | 24.1 | 24.2 | 24.2 | 24.3 | 24.3 | 24.4 | 24.4 | 24.5 | 24.5 |
| 25 | 24.6 | 24.6 | 24.7 | 24.7 | 24.8 | 24.8 | 24.9 | 24.9 | 25.0 | 25.0 |
| 26 | 25.1 | 25.1 | 25.2 | 25.2 | 25.3 | 25.3 | 25.4 | 25.4 | 25.5 | 25.5 |
| 27 | 25.6 | 25.6 | 25.7 | 25.7 | 25.8 | 25.8 | 25.9 | 25.9 | 26.0 | 26.0 |
| 28 | 26.1 | 26.1 | 26.2 | 26.2 | 26.3 | 26.3 | 26.4 | 26.4 | 26.5 | 26.5 |
| 29 | 26.6 | 26.6 | 26.7 | 26.7 | 26.8 | 26.8 | 26.9 | 26.9 | 26.9 | 27.0 |
| 30 | 27.0 | 27.1 | 27.1 | 27.2 | 27.2 | 27.3 | 27.3 | 27.4 | 27.4 | 27.5 |
| 31 | 27.5 | 27.5 | 27.6 | 27.6 | 27.7 | 27.7 | 27.8 | 27.8 | 27.9 | 27.9 |
| 32 | 28.0 | 28.0 | 28.0 | 28.1 | 28.1 | 28.2 | 28.2 | 28.3 | 28.3 | 28.4 |
| 33 | 28.4 | 28.5 | 28.5 | 28.5 | 28.6 | 28.6 | 28.7 | 28.7 | 28.8 | 28.8 |
| 34 | 28.9 | 28.9 | 29.0 | 29.0 | 29.0 | 29.1 | 29.1 | 29.1 | 29.2 | 29.2 |
| 35 | 29.3 | 29.3 | 29.3 | 29.4 | 29.4 | 29.5 | 29.5 | 29.5 | 29.6 | 29.6 |
| 36 | 29.7 | 29.7 | 29.8 | 29.8 | 29.9 | 29.9 | 30.0 | 30.0 | 30.0 | 30.1 |
| 37 | 30.1 | 30.2 | 30.2 | 30.3 | 30.3 | 30.4 | 30.4 | 30.5 | 30.5 | 30.5 |
| 38 | 30.6 | 30.6 | 30.7 | 30.7 | 30.8 | 30.8 | 30.8 | 30.9 | 30.9 | 31.0 |
| 39 | 31.0 | 31.0 | 31.1 | 31.1 | 31.2 | 31.2 | 31.2 | 31.3 | 31.3 | 31.4 |
| 40 | 31.4 | 31.5 | 31.5 | 31.5 | 31.6 | 31.6 | 31.7 | 31.7 | 31.7 | 31.8 |
| 41 | 31.8 | 31.9 | 31.9 | 31.9 | 32.0 | 32.0 | 32.1 | 32.1 | 32.1 | 32.2 |
| 42 | 32.2 | 32.3 | 32.3 | 32.3 | 32.4 | 32.4 | 32.4 | 32.5 | 32.5 | 32.5 |
| 43 | 32.6 | 32.6 | 32.7 | 32.7 | 32.7 | 32.8 | 32.8 | 32.9 | 32.9 | 33.0 |
| 44 | 33.0 | 33.0 | 33.1 | 33.1 | 33.2 | 33.2 | 33.2 | 33.3 | 33.3 | 33.4 |
| 45 | 33.4 | 33.5 | 33.5 | 33.5 | 33.6 | 33.6 | 33.7 | 33.7 | 33.7 | 33.8 |
| 46 | 33.8 | 33.9 | 33.9 | 33.9 | 34.0 | 34.0 | 34.0 | 34.1 | 34.1 | 34.1 |
| 47 | 34.2 | 34.2 | 34.2 | 34.3 | 34.3 | 34.4 | 34.4 | 34.4 | 34.5 | 34.5 |
| 48 | 34.6 | 34.6 | 34.6 | 34.7 | 34.7 | 34.8 | 34.8 | 34.8 | 34.9 | 34.9 |

One 1/4 mile center pivot  
averages between 700-1000 gpm (low pressure)

All three center pivots add up  
to be less than two full sized pivots.

Probably about 1 2/3 center pivots  
gpm = 1261.  $1261 / 1.43 = 756 \text{ gpm}$

This is within  
acceptable range.

Kelly [Signature]

SIGNATURE

Page 1 of Page 1

Handwritten notes and symbols at the top right of the map.

R36E

R31E

Post 33

T2S R36E R37E

27-7320

(Point of Diversion)

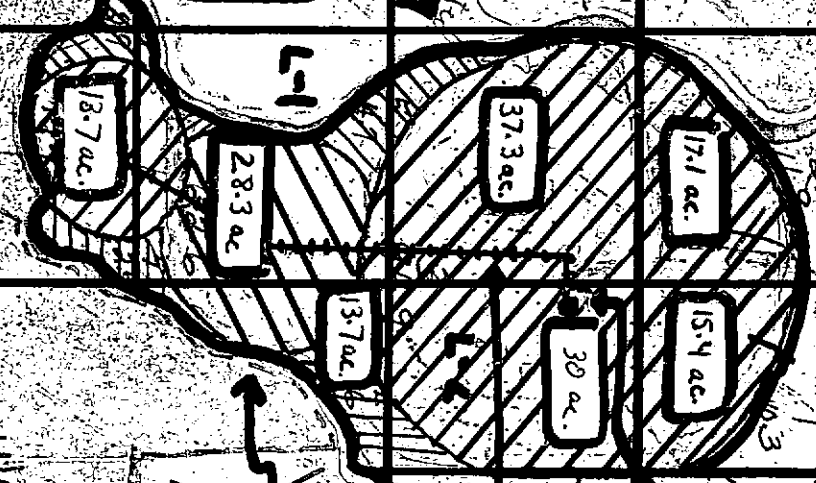
Mainline

MICROFILMED

Place of Use

Irrigated by Center Pivots

Irrigated by hand lines



16 ac

18.7 ac

28.3 ac

37.3 ac

17.1 ac

15.4 ac

30 ac

13.7 ac

Waste Idle

23 24 26 25

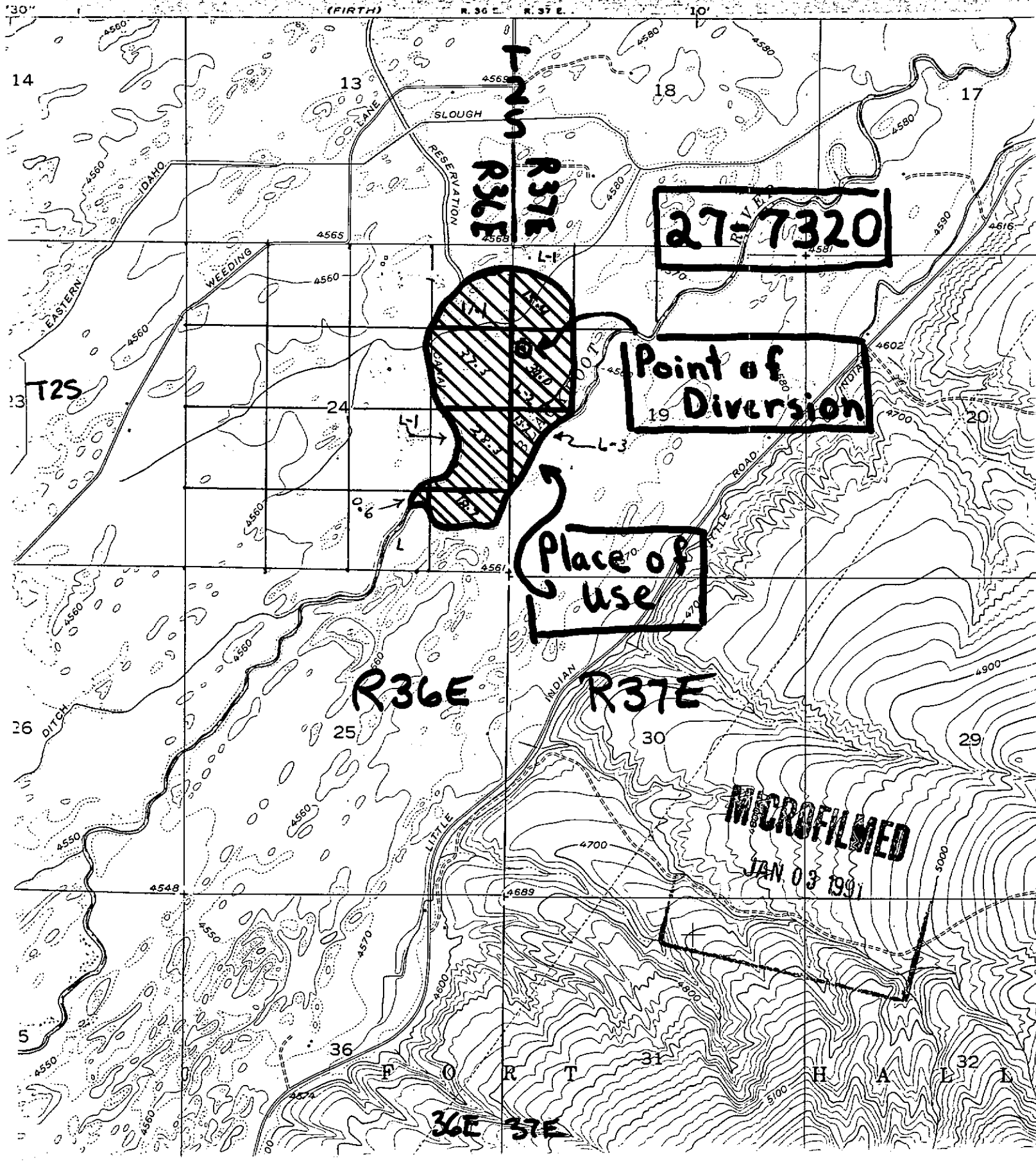
R36E

25 30

R37E

7-7320

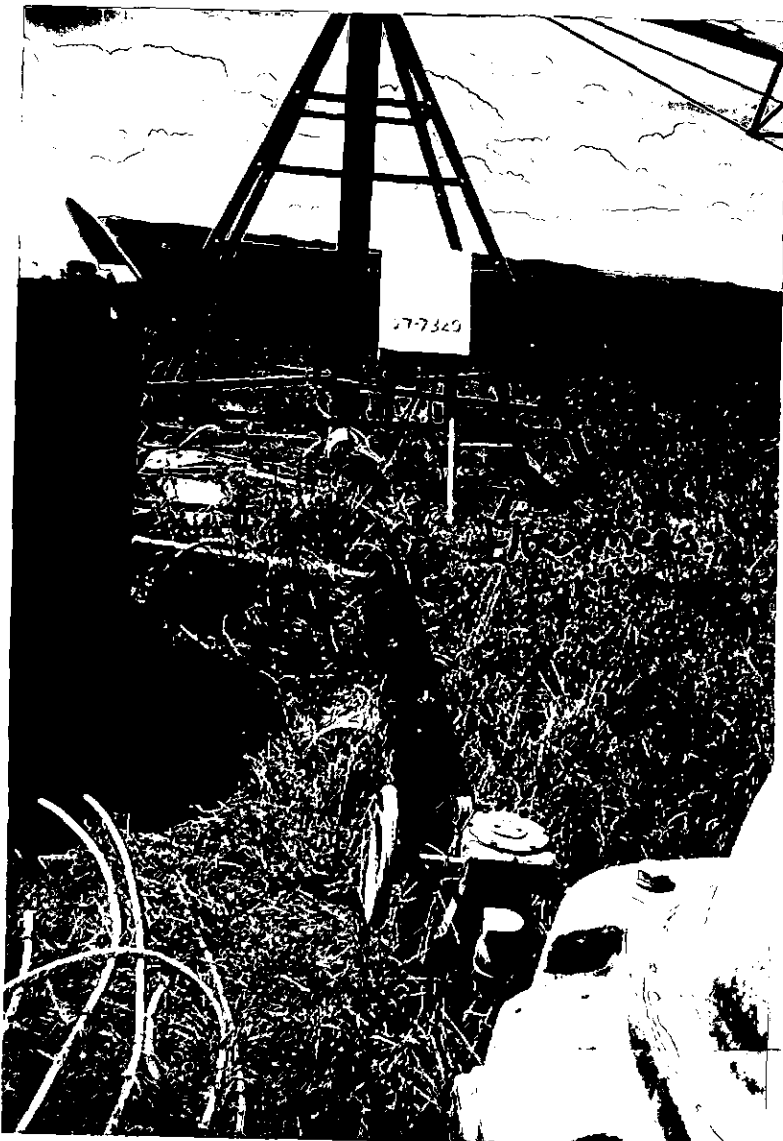
515-A1



27-7320



Point of  
Diversion



27-7320

**MICROFILMED**

JAN 03 1991

4/86

**RECEIVED**

JUL 15 1986

Department of Water Resources  
Eastern District Office

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

EXAMINATION FEE INFORMATION

For Office Use Only  
Fee Received 175.00  
Date 6-15-86  
Receipt # 39287  
Receipt by ms  
Sent to S.O. 2-18-86**RECEIVED**

JUL 22 1986

1. Permit No. 27-7320

ONE OF THE FOLLOWING BOXES SHOULD BE MARKED TO DESIGNATE YOUR CHOICE: Department of Water Resources

☒ I choose to have the department make the field examination of this permit; attached is the examination fee. (If this box is marked, complete items 1 thru 8.)2. Permit Holder: WRAY FARMS3. Post Office Address: 960 W Hwy 26 Blackfoot, Id. 83221Telephone No. 684-48684. Source of Water: ground

5. Extent of Use:

Domestic \_\_\_\_\_ (No. of households) Stockwater \_\_\_\_\_ (No. and type of stock)

Irrigation 175 (188) (acres) Other/Remark \_\_\_\_\_6. Total rate &/or volume for which proof is submitted 3.16 cfs \_\_\_\_\_ acre-feet

7. Show the date water was first diverted and beneficially used under this permit:

April, 1982

8. Person to contact to accompany the department representative during the field examination:

CLARK WRAY

(Name) JAN 03 1991

(Address)

(Telephone Number) 684-4458☐ I choose to have the field examination conducted by a certified water right examiner. Attached is a statement from the certified examiner I have selected verifying that he has been retained to conduct the examination. (If this box is marked, complete items 1 thru 7.)

Date

Signature of Permit Holder (and title, if appropriate)

copy returned for file



State of Idaho

## DEPARTMENT OF WATER RESOURCES

STATE OFFICE, 450 W. State Street, Boise, Idaho

JOHN V. EVANS  
Governor

Mailing address:  
Statehouse  
Boise, Idaho 83720

A. KENNETH DUNN

Director  
27-7320  
WRAY FARMS  
RT. 4 BOX 286  
BLACKFOOT, ID 83221

138164

April 17, 1986

CERTIFIED MAIL

### EXAMINATION FEE NOTICE

Dear Permit Holder:

Department records show that proof of beneficial use has been submitted for the above-referenced permit, but that a field examination has not yet been conducted to determine the extent of beneficial use of the water for licensing purposes.

House Bill 671 (effective April 4, 1986) enacted by the 1986 Idaho Legislature requires the payment of a fee before this department can conduct the field examination needed to issue a license confirming use of water under the permit. This letter is notification that the license examination fee is due within sixty (60) days of the date of this letter. The examination fee information sheet (enclosed) must be returned with the fee.

As an alternative to submitting the fee, the department will accept a field examination report completed by a certified water right examiner from the private sector. If you choose to have the examination done by a certified water right examiner, you need not submit the license examination fee to the department, but you must within sixty (60) days of the date of this letter return to the department, the examination fee information sheet showing appropriate information together with a statement from the certified examiner to verify that you have retained a certified examiner to conduct the field examination. If you choose this alternative, a completed field examination report must be submitted within one year of the date of this letter. You cannot later change your decision to use this alternative and submit the fee needed for the department to conduct the field examination, but you may change to another certified examiner.

JAN 03 1991

Certified water right examiners are licensed engineers, geologists, or land surveyors certified by the department to conduct water right examinations. The procedure for certifying examiners' results from the recently enacted HB 671 and is being developed at this time. A listing

of certified water right examiners will be available from this department when examiners have been certified.

If your permitted use, in fact, has already been examined by the department and you have not asked to have the examination repeated, the fee requirement is not applicable to your permit. If you believe this is the case, please contact the department.

The license examination fee is to be based on the amount of water you indicate you have developed, as listed in item 6 on the examination fee information sheet. The amount of water on which the examination fee is based can be less than the permitted amount, if less water has been diverted and beneficially used. The licensed amount of water, however, will not exceed the amount you claim on the examination fee information sheet. The enclosed license examination fee schedule shows a listing of applicable fees.

FAILURE TO SUBMIT WITHIN THE SIXTY (60) DAY PERIOD, THE FEE OR THE STATEMENT THAT A CERTIFIED EXAMINER HAS BEEN RETAINED TO MAKE THE FIELD EXAMINATION, WILL BE CAUSE TO ADVANCE THE PRIORITY OF THE PERMIT ONE DAY FOR EACH DAY THAT THE FEE SUBMITTAL IS LATE.

FAILURE TO SUBMIT THE FEE OR THE COMPLETED FIELD EXAMINATION REPORT WITHIN A YEAR WILL BE CAUSE TO CONSIDER THE PROOF OF BENEFICIAL USE TO BE INCOMPLETE AND TO LAPSE THE PERMIT.

The attached examination fee information sheet and the fee may be submitted to the following department offices.

Northern Region

Idaho Dept. of Water Resources  
4055 Government Way  
Coeur d'Alene, ID 83814  
Phone: 765-4639

Eastern Region

Idaho Dept. of Water Resources  
150 Shoup Ave., Suite 15  
Idaho Falls, ID 83401  
Phone: 525-7161

Southern Region

Idaho Dept. of Water Resources  
1041 Blue Lakes Blvd. North  
Twin Falls, ID 83301  
Phone: 734-3578

Western Region

Idaho Dept. of Water Resources  
450 W. State St., (Third Floor)  
Boise, ID 83720  
Phone: 334-2190

Sincerely,



L. GLEN SAXTON  
Chief, Operations Bureau

Enclosures

MICROFILMED

JAN 03 1991

September 13, 1983

RE: Permit No. 27-7320

Wray Farms  
Route #4, Box 286  
Blackfoot, ID 83221

Dear Sirs:

As per our telephone conversation this afternoon, I checked our micro-fische for a copy of the well log pertaining to the above referenced water right. I found that a well log has been filed with our office and I put a copy of it in your water right file. I have also enclosed a copy of the log for your records.

If we can be of any further help please feel free to contact our office.

Sincerely,

BAY WALKER  
Sr. Clerk

KB:k  
Enclosure

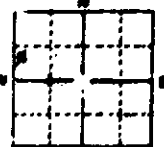
USE TYPEWRITER OR  
BALL POINT PEN

State of Idaho  
Department of Water Resources

WELL DRILLER'S REPORT

JUN 80

State 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.

| <b>1. WELL OWNER</b><br>Name <u>Leon D. Miller</u><br>Address <u>599 McAdoo Blvd</u><br>Owner's Permit No. <u>27-7320</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |          | <b>7. WATER LEVEL</b><br>Static water level <u>45</u> feet below land surface<br>Flowing <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No G.P.M. <u>100</u><br>Temperature <u>54</u> Quality <u>Good</u><br>Artesian (hole in pressure) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Controlled by <u>Valve</u> Cap <u>Cap</u>                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------|----------|-------|--------|------|----|---------|------|----|---------|--------|----|---------|--------|----|---------|--------|----|---------|--------|----|---------|--------|----|---------|--------|----|---------|--------|----|---------|--------|----|
| <b>2. NATURE OF WORK</b><br><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement<br><input type="checkbox"/> Abandoned (Describe method of abandoning)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          | <b>8. WELL TEST DATA</b><br>Pump <input type="checkbox"/> Bailor <input type="checkbox"/> Other <input type="checkbox"/><br>Discharge G.P.M. <u>100</u> Draw Down <u>10</u> Hours Pumped <u>1</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| <b>3. PROPOSED USE</b><br><input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/> Other (Specify type)<br><input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          | <b>9. LITHOLOGIC LOG</b><br>Hole Diam. <u>4</u> Depth <u>99</u> Material <u>clay, sand, gravel</u> Water Yes <input type="checkbox"/> No <input checked="" type="checkbox"/><br><table border="1"><thead><tr><th>Depth</th><th>Material</th><th>Water</th></tr></thead><tbody><tr><td>0 - 10</td><td>clay</td><td>No</td></tr><tr><td>10 - 20</td><td>sand</td><td>No</td></tr><tr><td>20 - 30</td><td>gravel</td><td>No</td></tr><tr><td>30 - 40</td><td>gravel</td><td>No</td></tr><tr><td>40 - 50</td><td>gravel</td><td>No</td></tr><tr><td>50 - 60</td><td>gravel</td><td>No</td></tr><tr><td>60 - 70</td><td>gravel</td><td>No</td></tr><tr><td>70 - 80</td><td>gravel</td><td>No</td></tr><tr><td>80 - 90</td><td>gravel</td><td>No</td></tr><tr><td>90 - 99</td><td>gravel</td><td>No</td></tr></tbody></table> |  | Depth | Material | Water | 0 - 10 | clay | No | 10 - 20 | sand | No | 20 - 30 | gravel | No | 30 - 40 | gravel | No | 40 - 50 | gravel | No | 50 - 60 | gravel | No | 60 - 70 | gravel | No | 70 - 80 | gravel | No | 80 - 90 | gravel | No | 90 - 99 | gravel | No |
| Depth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Material | Water                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 0 - 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | clay     | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 10 - 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | sand     | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 20 - 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 30 - 40                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 40 - 50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 50 - 60                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 60 - 70                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 70 - 80                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 80 - 90                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| 90 - 99                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gravel   | No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| <b>4. METHOD DRILLED</b><br><input checked="" type="checkbox"/> Cable <input type="checkbox"/> Rotary <input type="checkbox"/> Dug <input type="checkbox"/> Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| <b>5. WELL CONSTRUCTION</b><br>Diameter of hole <u>4</u> inches Total depth <u>99</u> feet<br>Casing schedule <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete<br>Thickness <u>1/2</u> inches Diameter <u>4</u> inches From <u>1</u> feet To <u>99</u> feet<br>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Was a packer or seal used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Perforated? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>How perforated? <input type="checkbox"/> Factory <input checked="" type="checkbox"/> Knife <input type="checkbox"/> Torch<br>Size of perforation <u>1/2</u> inches by <u>3</u> inches<br>Number <u>250</u> perforations From <u>55</u> feet To <u>99</u> feet<br>perforations <u>55</u> feet <u>99</u> feet<br>perforations <u>55</u> feet <u>99</u> feet<br>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Manufacturer's name _____<br>Type _____ Model No. _____<br>Diameter _____ Slot size _____ Set from _____ feet to _____ feet<br>Diameter _____ Slot size _____ Set from _____ feet to _____ feet<br>Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size of gravel _____<br>Placed from _____ feet to _____ feet<br>Surface seal depth <u>48</u> Material used in seal <input type="checkbox"/> Cement grout<br><input checked="" type="checkbox"/> Pudding clay <input type="checkbox"/> Well cuttings<br>Sealing procedure used <input checked="" type="checkbox"/> Slurry pit <input type="checkbox"/> Temporary surface casing<br><input type="checkbox"/> Overbore to seal depth |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |
| <b>6. LOCATION OF WELL</b><br>Sketch map location must agree with written location.<br><br>Subdivision Name _____<br>Lot No. _____ Block No. _____<br>County <u>Blaine</u> _____<br>NW <u>4</u> SW <u>4</u> Sec. <u>19</u> T. <u>2</u> R. <u>37</u> S. <u>4</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          | <b>10.</b><br>Work started <u>3/2/82</u> finished <u>3/8/82</u><br><b>11. DRILLER IDENTIFICATION</b><br>Firm Name <u>Box 598</u> Firm No. <u>83</u><br>Address <u>Box 598</u> City <u>Boise</u> State <u>ID</u><br>Signed by (Firm Official) <u>Mary J. Benson</u><br>and <u>John Benson</u><br>(Operator) <u>John Benson</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |       |          |       |        |      |    |         |      |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |         |        |    |

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

POOR QUALITY ORIGINAL

August 30, 1983

RE: Permit No. 27-7320

Wray Farm  
Route #4, Box 286  
Blackfoot, ID 83221

Dear Sirs:

This office acknowledges receipt of the Assignment of the above referenced permit to you.

Enclosed for your records is a copy of the permit. Be sure to note the special conditions of approval on the fourth page that identify requirements necessary for developing the permit into a licensed water right.

If you have any questions on this matter, please feel free to contact us.

Sincerely,

ROBYN CARLSON  
Chief Clerk

RC:kw  
Enclosure

cc: Federal Land Bank Assn. of Blackfoot  
P.O. Box 10  
Blackfoot, ID 83221

## Federal Land Bank Association of Blackfoot

10 West Judicial, P.O. Box 10  
Blackfoot, Idaho 83221  
Telephone: (208) 785-0820

RICHARD E. SPENCER, Manager



August 3, 1983

RECEIVED  
AUG 05 1983

State of Idaho  
Department of Water Resources  
150 Shoup  
Idaho Falls, Idaho 83401

Department of Water Resources  
Eastern District Office

Re: FLB F-195778-8 Wray Farms  
Permit No. 27-7320

Gentlemen:

Enclosed please find Assignment of Permit No. 27-7320 from Leon D. Dance and Jiro Yamada to Wray Farms.

If this Assignment is in order, please send us an acknowledgment that you have received this assignment. Thank you.

Yours very truly,

*for Joan M. McNeil*  
Tony N. Klein  
Loan Officer

TK:jm

Enclosure

RECEIVED





STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
EASTERN REGION

John V. Evans  
Governor

A. Kenneth Dunn  
Director

150 Shoup  
Idaho Falls, Idaho 83401  
(208) 525-7161

April 28, 1983

Leon Dance or Jiro Yamada  
599 McAdoo Street  
Blackfoot, ID 83221

RE: 27-7320

Dear Permit Holder:

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.

  X   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,

HAROLD W. JONES  
Sr. Resource Agent

HWJ:JK

RECEIVED  
MAY 1 1983

## 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. 27 7320

Name(s) of Permit Holder: Leon Dance &/or Jiro Yamada

Post Office Address: 599 McAdoo Street

Blackfoot, Idaho 83221

Tel. No. 785-3752

Source of Water: Groundwater

Extent of Use: ☐ Domestic (number of households)  
☐ Stockwater (number and type of stock)  
☒ Irrigation 158 (acres)  
☐ Other

APR 1 1983

Department of Water Resources

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.

March 31, 1983

Date

Leon Dance  
Jiro Yamada  
Signature of Permit Holder

PLACE  
TEN CENT  
STAMP  
HERE

RECEIVED

APR 7 1983



IDAHO DEPARTMENT OF WATER RESOURCES  
STATEHOUSE  
BOISE, IDAHO 83720

MICROFILMED

August 18, 1982

RE: Permit No. 27-7320

Leon Dance &/or Jiro Yamata  
599 McAdoo  
Blackfoot, ID 83221

Gentlemen:

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

Please be advised that the installation of non-perforated casing to a depth of 100 feet or so, or through a confining layer would reduce the potential of interference of the well with surface water flows in the Blackfoot River.

Be sure to note the special condition requiring you to install a measuring device, or an access port to provide for the installation of measuring equipment by the Department. Enclosed please find a list of measuring device options, and specifications for the installation of the access port.

We have enclosed a form entitled "Making Proof of Beneficial Use". Please read the instructions carefully since you must take further action to develop this permit into a license.

Sincerely,

DAVID R. TUTHILL, JR., P.E.  
Supervisor, Water Allocation Section

DRT:kw  
Enclosures

UNRECORDED



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

July 21, 1982

MEMO

TO: Jim Johnson

FROM: Stan Szczepanowski /*SS*

SUBJECT: Application #27-7320 for a 16", 100 ft. deep irrigation well (3.16 cfs) in T2S R37E Section 19 SW $\frac{1}{4}$ NW $\frac{1}{4}$ , Bingham County

As I wrote for a proposed well (application #27-7308) in Section 24, immediately west of this one, it is highly likely that the well will draw water from the Blackfoot River and, in this case, also from the Reservation Canal. The stratigraphic information on well logs is limited but leads me to believe that no casing recommendation would protect the river and canal from the pumping influence of the well.

SS:mb

RECEIVED  
JUL 21 1982

State of Idaho  
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: KC Wilson

APPLICATION NUMBER: 27 7320

CHECK:

- ☒ Source.  
☒ Point of diversion.  
☒ County.  
☒ Quantity of water and period of use.  
☒ 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: \_\_\_\_\_

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

PROCESSING:

- ☐ Yes ☒ No  
☐ Yes ☒ No

Platted by: \_\_\_\_\_ Map No. \_\_\_\_\_

Other rights on same place of use. \_\_\_\_\_

- ☒ Yes ☐ No\*

In form for advertising.

Final date for protests: June 28, 1982

- ☐ Yes ☒ No

Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

- ☒ Affidavit of publication received. Date: 6-28-82  
☒ 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? \_\_\_\_\_  
6-01-1982 Date of priority recommended.

**NOTE:** Recommend review by Hydrology to determine need for conditioning well construction.  
#26

By: Ernest Carlson

Date: 6-29-82

STATE OFFICE REVIEW:

SLW/103

OIC

send receipt

See attached sheet for more information.

By: [Signature]

Date: 7/6/82

see 27-7308 for special condition

**RECEIVED**

JUL 01 1982

3/79

IDENT. NO.

27 7320

I D A H O   D E P A R T M E N T   O F   W A T E R   R E S O U R C E S

WATER RIGHT  
DATA ENTRY LOG

[illegible]

22-7320

DANCE, LEON  
YAMATA, JIRO

599 MCADOO, BLACKFOOT, ID 83221

Source: GROUNDWATER

Date Filed: 06/01/1982

Amount: 3.16 CFS

Diversion Point: SWNW Sec 19 T 02S R 37E, BINGHAM Co.

Use: IRRIGATION (3.16 CFS) from 03/15 to 11/15

Place of Use: NENE SENE NESE SESE Sec 24 T 02S R 36E NWNW SWNW NWSW  
Sec 19 T 02S R 37E FOR 158 ACRES

Diversion Means: WELL, PIVOT & WHEEL LINES



STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
EASTERN REGION

John V. Evans  
Governor

A. Kenneth Dunn  
Director

150 Shoup  
Idaho Falls, Idaho 83401  
(208) 525-7161

RECEIVED

JUN 1 1982

Department of Water Resources  
Eastern District Office

March 12, 1982

LEON DANCE  
599 McAdoo  
Blackfoot, Idaho 83221

Dear Mr. Dance:

Enclosed you will find your application for water right. You must complete line 8C which concerns other water rights used for the same purpose as the permit. This would include any canal company water you might have.

When the application is complete, please sign the document if you feel all the information is correct.

Send the application with a fee for \$105 to this office for processing.

Sincerely,  
*Harold W. Jones*  
HAROLD W. JONES  
Sr. Resource Agent

HWJ:brs

enclosure: as stated

RECEIVED