

T-40N
 A-2W
 27
 P.D.B. O
 P.U.

MICROFILMED
 DEC 22 1988

(Applicant)

Affidavit of Publication

STATE OF IDAHO
County of Latah

ss.

Theresa Myers

being first duly sworn, on oath,
deposes and says:

That he is the printer of The IDAHONIAN, a newspaper of general circulation, printed and published daily except Sunday at Moscow, Latah County, Idaho, in compliance with Sections 60-106, 60-107, and 60-108 of the Idaho Code and the amendments thereto; that the notice of which the annexed is a full, true and correct printed copy was published in the regular and entire issues of said newspaper and not in a supplement thereto, upon the following dates:

Feb 18, 25,
1988

the same being the dates designated for the publication of said notice.

Theresa Myers
Subscribed and sworn to before

me this 25 day of February
19 88

Spis Andrels
Notary Public,
residing at Genesee, Idaho

NOTICE OF APPLICATION FOR WATER RIGHT

The following application(s) have been filed to appropriate the public waters of the State of Idaho:

86-7233

FUNKE, FRED

RT. 1 BOX 61F, DEARY, ID 83823

Source: Groundwater

Diversion Pt: SWSW Sec. 27 T 40N R 02W

Use: IRRIGATION: (0.140 CFS), STOCKWATER (0.020 CFS), COMMERCIAL (0.020 CFS), DOMESTIC (0.040 CFS).

Date Filed: 02/1/1988

In: SWSW Sec. 27 T 40N R 02W FOR 7 ACRES

The permit(s) will be subject to all prior water rights. Protests must be filed with the Director, Dept. of Water Resources, 4055 Government Way, Suite 9, Coeur d'Alene, Idaho 83814 on or before MARCH 7, 1988.

R. KEITH HIGGINSON, Dir.
Feb. 18, 25, 1988

OK
2/29/88

RECEIVED
FEB 25 1988
Department of Water Resources
Northern District Office

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STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT SUPPLEMENT
C O N T E N T S

() B/U Acknowledgment Letter Sent

This Examination Report Contains the Following Documents.

(☒) Field Report (☒) Quad Sheet () Gov. Lot Plat (☒) Rules Check list
() Aerial Photo () Photo PD/PU (☒) Well Log

Number of Diagrams Attached _____ Number of Calculation Sheets Attached _____

() Correspondence (Date) _____

() Other (List) _____

Contacts: *He* *Well*

Remarks:

Some domestics



Exam Completed By _____ Date _____

Sr. Agent Review _____ Date _____

Regional Manager Review *RYA* Date *5/8/90*

PERMIT NUMBER

86-07233

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No. 86-7233

1. Owner: Fred Funke Phone No.

Current Address: Rt 1 Box 61F Deary Id 83823

2. Accompanied by: None EXAM. DATE: 7/17/89

Address: _____ Phone No. _____

Relationship to Permit Holder: _____

3. Source: groundwater tributary to —

B. OVERLAP REVIEW

1. Other water rights with same place of use: None

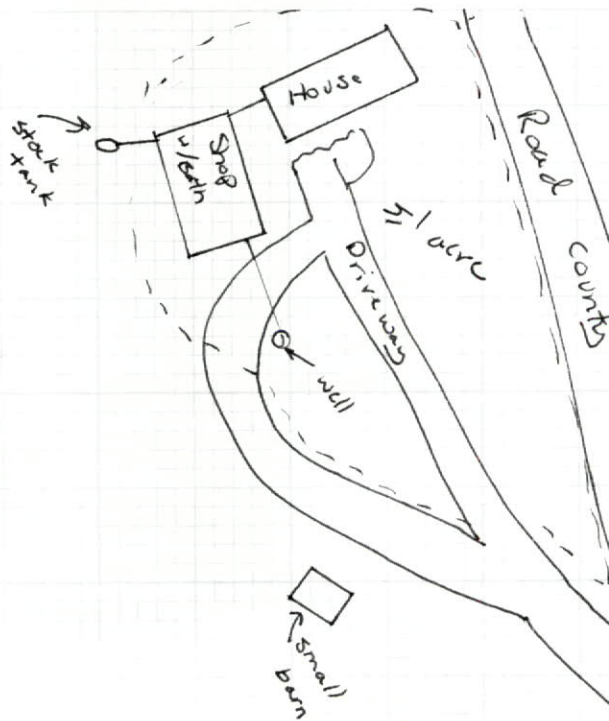
☐ Copies Attached

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" = NTS

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)

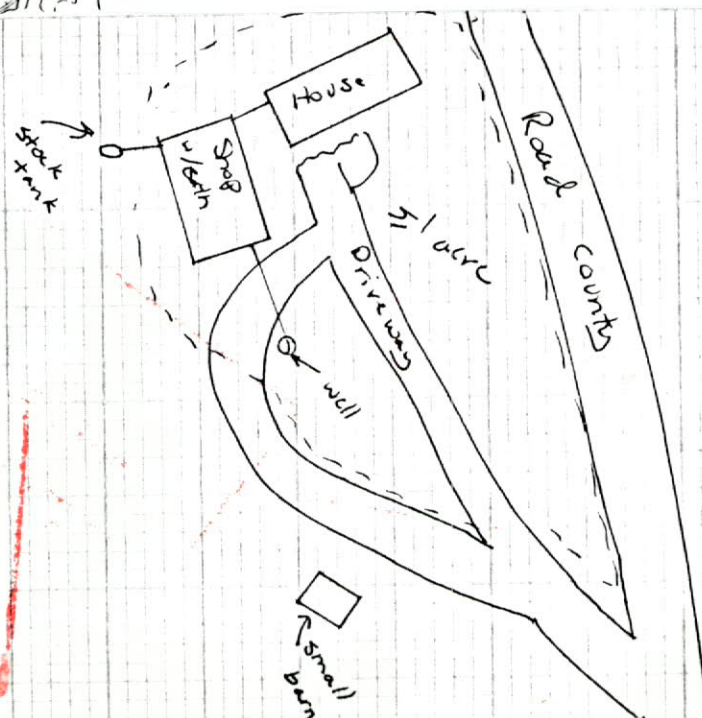
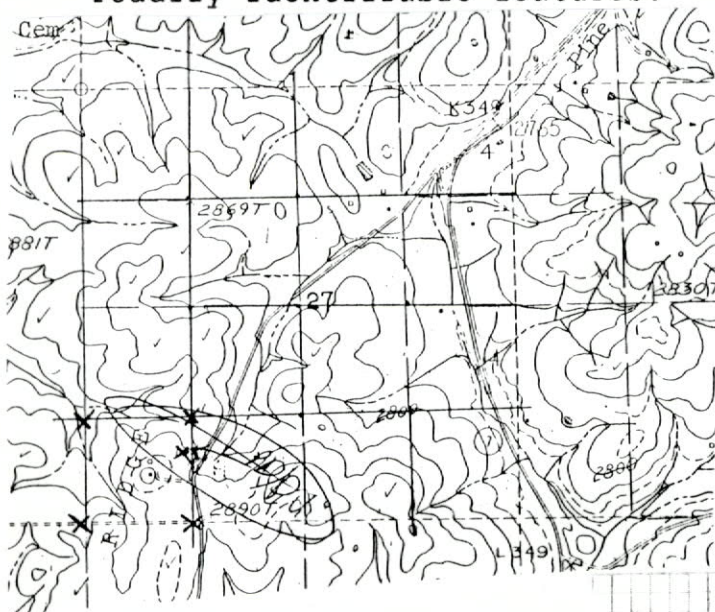
☐ Aerial Photo Attached
(required for irrigation of 10 acres or more).

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SCHEMATIC

Provide a schematic diagram showing the location of the well in the quarter-quarter with respect to houses, roads, other wells or readily identifiable features.



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Inspected by Z. J. Dutton

Date 2/17/89

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

WATER RIGHT NO. 86-07233

Priority: February 1, 1988

Maximum Diversion Rate:

0.06 CFS

Maximum Diversion Volume:¹

3.9 AF

This is to certify, that FRED FUNKE

RT. 1 BOX 61F

DEARY, ID 838230000

has complied with the terms and conditions of the permit, issued pursuant to Application for Permit dated February 1, 1988; and has submitted Proof of Beneficial Use on May 10, 1988. An examination indicates that the works have a diversion capacity of .060 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	0.02 CFS	3.0 AF
STOCKWATER	01/01 to 12/31	0.02 CFS	0.2 AF
COMMERCIAL	01/01 to 12/31	0.02 CFS	0.1 AF
DOMESTIC	01/01 to 12/31	0.04 CFS	0.6 AF
Totals		0.06 CFS	3.9 AF

LOCATION OF POINT(S) OF DIVERSION:

SWSW , Sec. 27, Township 40N, Range 02W
LATAH 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>
40N	02W	27	SWSW	1		1

Total number of acres irrigated: 1

PLACE OF USE: STOCKWATER, same as IRRIGATION use

PLACE OF USE: COMMERCIAL, same as IRRIGATION use

PLACE OF USE: DOMESTIC, same as IRRIGATION use

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.

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517

State of Idaho
Department of Water Resources

WATER RIGHT LICENSE

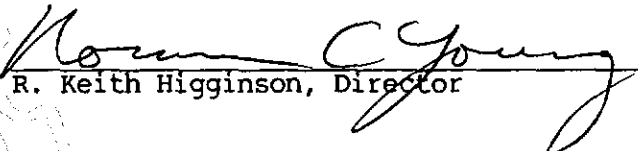
WATER RIGHT NO. 86-07233

CONDITIONS/REMARKS:

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 3.0 afa per acre for the lands above.
6. Commercial use is for a shop; stockwater use is for 8 head; domestic use is for 1 home.

This license is issued pursuant to the provisions of Section 42-219, Idaho Code. Witness the seal and signature of the Director, affixed at Boise, this 10TH day of OCTOBER, 1990.

Acting for


R. Keith Higginson, Director

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OCT 25 1990

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
APPLICATION FOR PERMIT

Ident. No. 86-1233

To appropriate the public waters of the State of Idaho

APPROVED

1. Name of applicant FRED FUNKE Phone _____
Post office address RT 1 BOX 61F, DEARY, ID 83823
2. Source of water supply GROUNDWATER which is a tributary of _____
3. Location of point of diversion is _____ 1/4 of SW 1/4 of SW 1/4, Govt. Lot _____
Sec. 27 Township 40N Range 2W B.M. LATAH County; additional
points of diversion if any: _____
4. Water will be used for the following purposes:
Amount 0.14 for IRRIGATION purposes from MAR 15 to NOV 15 (both dates inclusive)
(cfs or acre-feet per annum)
Amount 0.04 for DOMESTIC purposes from JAN 1 to DEC 31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount 0.02 for COMMERICAL purposes from JAN 1 to DEC 31 (both dates inclusive)
(cfs or acre-feet per annum)
Amount 0.02 for STOCKWATER purposes from JAN 1 to DEC 31 (both dates inclusive)
(cfs or acre-feet per annum)
5. Total quantity to be appropriated is (a) 0.14 and/or (b) _____
cubic feet per second acre feet per annum
6. Proposed diverting works:
 - a. Description of ditches, flumes, pumps, headgates, etc. WELLS & PUMP
 - b. Height of storage dam _____ feet; active reservoir capacity _____ acre-feet; total
reservoir capacity _____ acre-feet; period of year when water will be diverted to storage:
_____ to _____ inclusive.
 - c. Proposed well diameter is 8 inches; proposed depth of well is 300 feet.
 - d. Is ground water with a temperature of greater than 90°F being sought? _____
7. Time required for the completion of the works and application of the water to the proposed beneficial use is
5 years (minimum 1 year).

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8. Description of proposed uses (if irrigation only, go to item 9):

- a. Hydropower; show total feet of head and proposed capacity in KW. _____
- b. Stockwatering; list number and kind of livestock. 4 HORSES - 2003 HEAD CATTLE
- c. Municipal; show name of municipality. _____
- d. Domestic; show number of households. 1
- e. Other; describe fully. COMMERCIAL USE - DOMESTIC SUPPLY FOR A SMALL SHOP THAT IS USED ~~WHEN~~ SOMETIMES.

9. Description of place of use:

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

TWP	RANGE	SEC.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				TOTALS
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
40N	2W	27											D, 5, 6 7						7

Total number of acres to be irrigated 7

10. Describe any other water rights used for the same purposes as described above. NONE

11. a. Who owns the property at the point of diversion? APPLICANT
- b. Who owns the land to be irrigated or place of use? "
- c. If the property is owned by a person other than the applicant, describe the arrangement enabling the applicant to make this filing. _____

12. Remarks: WELL DRILLED IN 1981

FILED

DEC 22 1988

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

DEC 17 1988

27

R-2W

T-40N

PDB
P.U

27

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DEC 22 1988

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.

Neil Lunka
(Applicant)

(Applicant)

Proposed Priority 2/1/88

Received by KK Date 2/1/88 Time 4:00p Preliminary check by JK
Fee \$ 30.00 Receipted by KK # 41910 Date 2/1/88
Publication prepared by [signature] Date 2/1/88 Published in Big Hole
Publication approved [signature] Date 2/29/88

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. 86-7233, 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 April 1, 19 90.

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. The water right acquired under this permit if for hydropower purposes shall be junior and subordinate to all rights to the use of water, other than hydropower, within the State of Idaho that are initiated later in time than the priority of this permit and shall not give rise to any right or claim against any future rights to the use of water, other than hydropower, within the State of Idaho initiated later in time than the priority of this permit.

e. Other: Permit holder shall commence the excavation or construction of diverting works within one year of the date this permit is issued and shall proceed diligently until the project is complete.

Witness my hand this 30th day of MARCH, 1988.

[Signature]
Director

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DEC 22 1988

Affidavit of Publication

STATE OF IDAHO
County of Latah

ss.

Theresa Myers

being first duly sworn, on oath,
deposes and says:

That he is the printer of The IDAHONIAN, a newspaper of general circulation, printed and published daily except Sunday at Moscow, Latah County, Idaho, in compliance with Sections 60-106, 60-107, and 60-108 of the Idaho Code and the amendments thereto; that the notice of which the annexed is a full, true and correct printed copy was published in the regular and entire issues of said newspaper and not in a supplement thereto, upon the following dates:

Feb 18, 25,
1988

the same being the dates designated for the publication of said notice.

Theresa Myers
Subscribed and sworn to before

me this 25 day of February
19 88

Les Andrus
Notary Public,
residing at Genesee, Idaho

NOTICE OF APPLICATION FOR WATER RIGHT

The following application(s) have been filed to appropriate the public waters of the State of Idaho:

86-7233

FUNKE, FRED

RT. 1 BOX 61F, DEARY, ID 83823

Source: Groundwater

Diversion Pt: SWSW Sec. 27 T 40N R 02W

R 02W

Use: IRRIGATION: (0.140 CFS),
STOCKWATER (0.020 CFS), COM-
MERCIAL (0.020 CFS), DOMESTIC
(0.040 CFS).

Date Filed: 02/1/1988

In: SWSW Sec. 27 T 40N R 02W
FOR 7 ACRES

The permit(s) will be subject to all prior water rights. Protests must be filed with the Director, Dept. of Water Resources, 4055 Government Way, Suite 9, Coeur d'Alene, Idaho 83814 on or before MARCH 7, 1988.

R. KEITH HIGGINSON, Dir.
Feb. 18, 25, 1988

[Handwritten signature]
[Handwritten initials]
2/29/88

RECEIVED
FEB 29 1988

Department of Water Resources
Northern District Office

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DEC 22 1988

October 11, 1990

FRED FUNKE
RT. 1 BOX 61F
DEARY, ID 838230000

RE: PERMIT NO. 86-07233

Dear Permit Holder(s):

Enclosed herewith is a copy of the Water Right License issued on the above referenced permit.

Sincerely,

JIM JOHNSON
Water Rights Supervisor

JJ:blm

Enclosure

RECORDED

OCT 25 1990

September 18, 1990

FRED FUNKE
RT. 1 BOX 61F
DEARY, ID 838230000

RE: PERMIT NO. 86-07233

Dear Permit Holder(s):

Enclosed is a draft copy of the license proposed to be issued on the above referenced water right.

This right is currently being reviewed by this office for licensing. The enclosed preliminary copy is subject to change upon further administrative review.

We ask that you review the proposed license and if you do not concur with the information, please let us know within 10 days.

Sincerely,

JIM JOHNSON
Water Rights Supervisor

JJ:sc

Enclosure

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SENIOR AGENT REVIEW

RECEIVED
MAY 14 1990

Check List
for
Beneficial Use Field Report

Department of Water Resources

Permit 96-07239

✓ **A. GENERAL INFORMATION**

- ✓ 1. Name and address are most current available. (Check BU statement)
✓ 2. Exam Date
✓ 3. Source (Check Permit)

✓ **B. OVERLAP REVIEW**

- ✓ 1. & 2. (Rule 5,1,4)

✓ **C. SYSTEM DESCRIPTION**

- ✓ 1. Diversion System Diagram (Rule 5,1,3 / 5,1,4)
✓ 2. USGS (Rule 5,1,7 / 5,1,9) Aerial (Rule 5,1,17)
✓ 3. Word Picture (Rule 5,1,3 / 5,1,4)
✓ 4. Diversion (Rule 5,1,3)
✓ 5. Compare with USGS Map, Land Survey Maps, Aerial Photos and Permit.
✓ 6. Irrigation (Rule 5,1,8)

✓ **D. FLOW MEASUREMENTS** Check math (Rule 5,1,13 / 5,1,14)

✓ **E. FLOW CALCULATIONS** Check math (Rule 5,1,13 / 5,1,14)

✓ **F. OPTIONAL**

✓ **G. VOLUME CALCULATIONS**

- Three significant figures and no more than 1/10's (Rule 6,1,2)
Fish (Rule 5,1,11) number stock, homes, etc... (Rule 5,1,12)

✓ **H. REMARKS AND OVERLAP ANALYSES**

- ✓ All actual uses listed; all permitted uses not used, also listed; (Rule 5,1,2):
✓ Overlaps (Rule 5,1,4):
✓ Return flows (Rule 5,1,5):
✓ Conditions (Rule 5,1,6).

✓ **I. RECOMMENDATIONS**

- ✓ 1. Municipal (Rule 5,1,10): Compare with items E & G, permit, fee, capacity
(Rule 5,1,15): Measured flows for each use listed separately (Rule 5,1,14).
Period of year (Rule 5,1,13)
✓ 2. Compare permit to exam for amendments (Rule 5,1,16)

✓ **J. AUTHENTICATION**

Name, Signature, Certification Date, Exam Date.

✓ **WELL INSPECTION REPORT**

Check with permit and well log for discrepancies

Signature *[Signature]* Date 8/24/89

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT SUPPLEMENT
C O N T E N T S

() B/U Acknowledgment Letter Sent

This Examination Report Contains the Following Documents.

(☒) Field Report (☒) Quad Sheet () Gov. Lot Plat (☒) Rules Check list
() Aerial Photo () Photo PD/PU (☒) Well Log

Number of Diagrams Attached _____ Number of Calculation Sheets Attached _____

() Correspondence (Date) _____

() Other (List) _____

Contacts: *The Well*

Remarks:

Some domestics



Exam Completed By _____

Sr. Agent Review _____

Regional Manager Review *QWA*

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OCT 25 1990

Date _____

Date _____

Date *5/8/90*

PERMIT NUMBER

86-07233

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No. 86-7233

1. Owner: Fred Funke

Phone No. _____

Current Address: Rt 1 Box 61F Deary Id 83823

2. Accompanied by: NO ONE

EXAM. DATE: 7/17/89

Address: _____

Phone No. _____

Relationship to Permit Holder: _____

3. Source: groundwater tributary to _____

B. OVERLAP REVIEW

1. Other water rights with same place of use: NONE

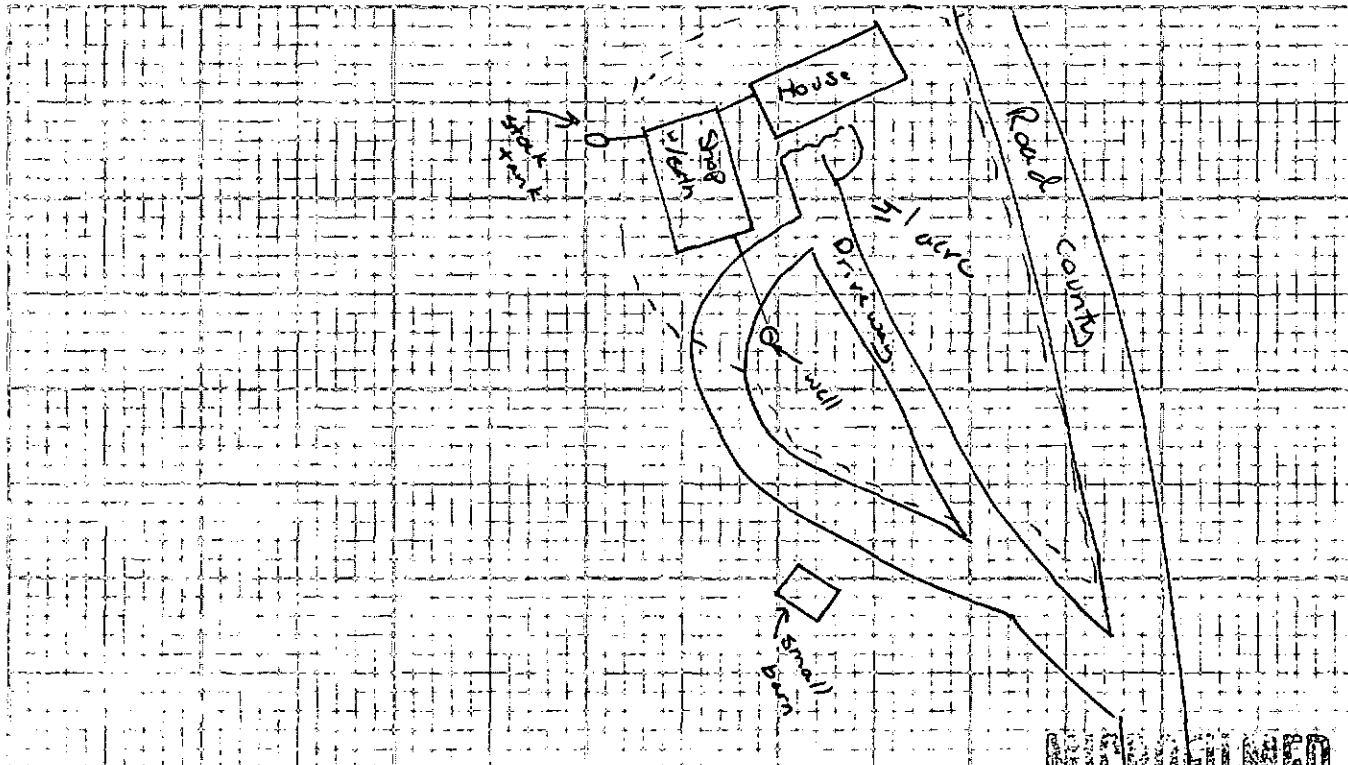
☐ **Copies Attached**

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" = NTS

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 with line to house and shop with bath and to
stock tank ~~behind~~ behind shop

☐ 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
	submersible	3/4			

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

5. Point(s) of Diversion:

Ident. No.	Gov't. Lot	1/4	1/4	1/4	Sec.	Twp.	Rge.	County	Method of Determination/Remarks
			SW	SW	27	40N	2W	Latah	Map

6. Place(s) of Use:

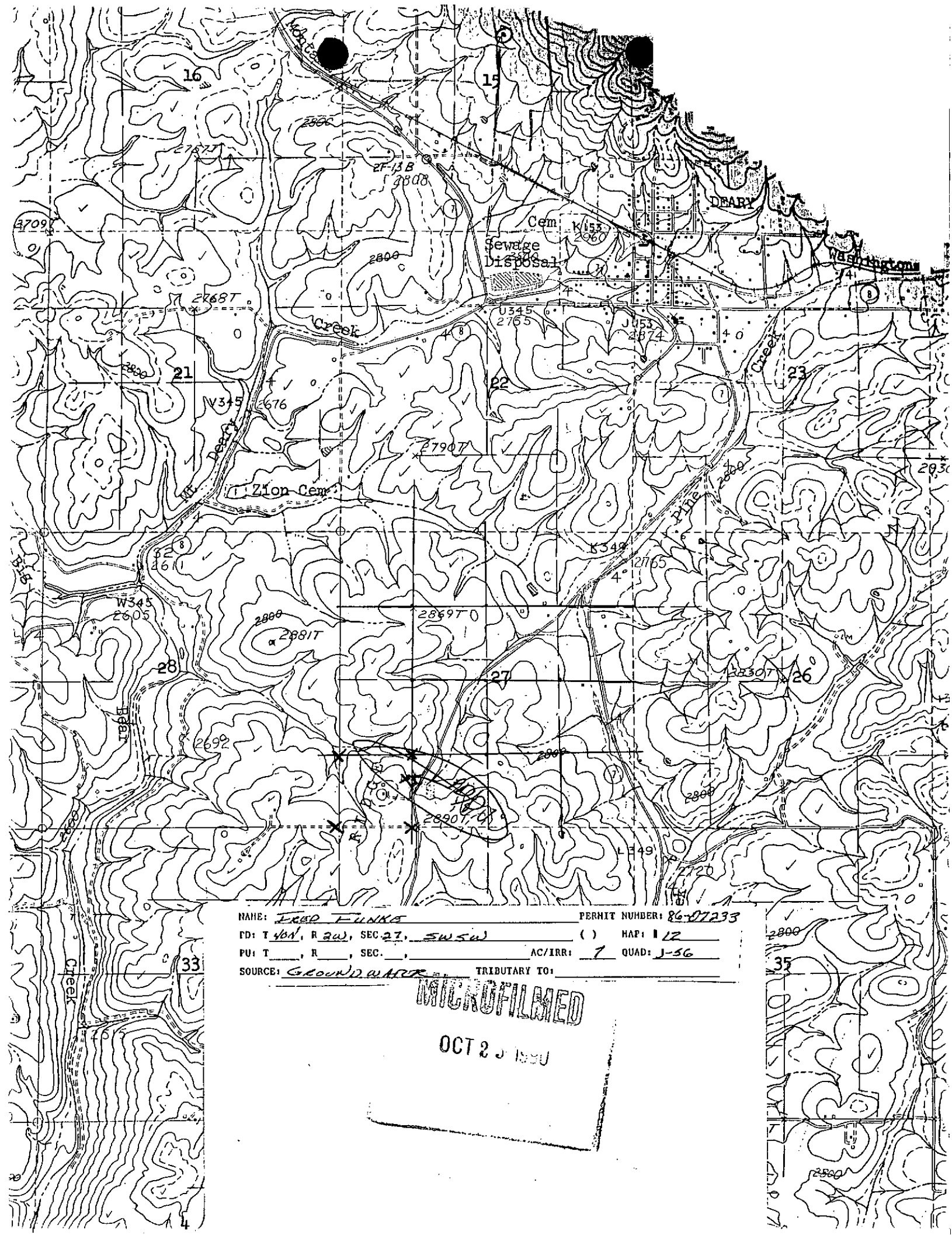
Indicate Method of Determination Map

Twp.	Rge.	Sec.	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	NW 1/4	SW 1/4	SE 1/4	
40N	2W	27											D						
													S						
													C						
													I						1

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Do not use this space



NAME: FRED FUNKS PERMIT NUMBER: 86-07233
FD: T 40N, R 2W, SEC 27, SWSW () HAP: 12
PU: T, R, SEC. AC/IRR: 7 QUAD: J-56
SOURCE: GROUNDWATER TRIBUTARY TO:

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Do not use this space

D. FLOW MEASUREMENTS

NONE

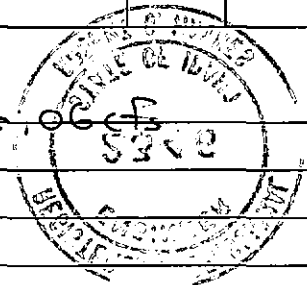
☐ Additional Data Sheets Attached

1.

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

2. Measurements:

$$Q = \frac{8.8(7)(1\frac{1}{2})}{2.3(30) + 100} = 0.02 \text{ cfs}$$



E. FLOW CALCULATIONS

☐ Additional Computation Sheets Attached

1. Measured Method:



2. Alternate Method for Checking Purposes:

Domestic 0.04 cfs Commercial 0.02 cfs
Stock water 0.02 cfs Irrigation 0.02 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:

$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 3 \text{ afa}$

$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation Season}) \times 1.9835 = 14.6 \text{ afa}$

$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} = 3 \text{ afa}$



2. Volume Calculations for Other Uses:

Domestic 0.6 afa

Commercial = 100 gal/day = 0.1 afa

Stock water = 0.2 afa (8 head)

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H. REMARKS AND OVERLAP REVIEW ANALYSIS

Found No set up to irrigate more than lawn and garden. ≈ 1 acre

I. RECOMMENDATIONS

1. Recommended Amounts

Beneficial Use	Period of Use		Rate of Diversion Q (cfs)	Annual Volume V (afa)
	From	To		
Irrigation	3/15	11/15	0.03 cfs	3 afa
STOCK	1/1	12/31	0.02 cfs	0.2 afa
COMMERCIAL	1/1	12/31	0.02 cfs	0.1 afa
DOMESTIC	1/1	12/31	0.04 cfs	0.5 afa
Totals:			0.06 cfs	3.9 afa

2. Recommended Amendments

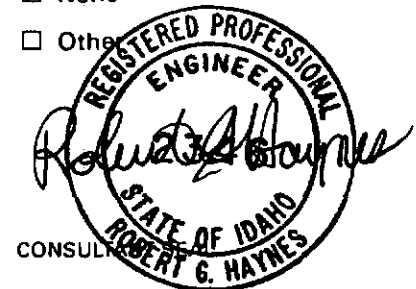
- ☐ Change P.D. as reflected above ☐ Add P.D. as reflected above
☐ Change P.U. as reflected above ☐ Add P.U. as reflected above

☒ None

☐ Other

J. AUTHENTICATION

Field Examiner's Name Louis Sukoraty
 Signature [Signature]
 Certification Date 2/17/89
 Field Report Preparation Date 8/3/89



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

SC 8/21/90

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OCT 25 1990

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

OCT 24 1988

1. WELL OWNER Name <u>Fred Lucke</u> Address <u>Neary, Idaho</u> Owner's Permit No. <u>86-7233</u>		7. WATER LEVEL Static water level _____ feet below land surface. Flowing? ☐ Yes ☐ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____ Describe artesian or temperature zones below.																																																																																																											
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Air ☐ Other _____ <table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td>30 GPM</td><td>320</td><td></td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	30 GPM	320																																																																																																					
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>3</td><td>TOP SOIL</td><td></td><td></td></tr><tr><td>8</td><td>3</td><td>5</td><td>REDDISH CLAY</td><td></td><td></td></tr><tr><td>8</td><td>5</td><td>9</td><td>FR. BRN ROCK</td><td></td><td></td></tr><tr><td>8</td><td>9</td><td>15</td><td>BLUE BASALT</td><td></td><td></td></tr><tr><td>8</td><td>15</td><td>20</td><td>BLUE BASALT</td><td></td><td></td></tr><tr><td>8</td><td>20</td><td>38</td><td>TAN CLAY</td><td></td><td></td></tr><tr><td>8</td><td>38</td><td>63</td><td>GREEN CLAY</td><td></td><td></td></tr><tr><td>8</td><td>63</td><td>75</td><td>BLUE BASALT</td><td></td><td></td></tr><tr><td>8</td><td>75</td><td>95</td><td>SANDY BRN ROCK</td><td></td><td></td></tr><tr><td>8</td><td>95</td><td>100</td><td>BLUE BASALT</td><td></td><td></td></tr><tr><td>8</td><td>100</td><td>170</td><td>BLUE BASALT</td><td></td><td></td></tr><tr><td>8</td><td>170</td><td>180</td><td>GREEN CLAY</td><td></td><td></td></tr><tr><td>8</td><td>180</td><td>190</td><td>BLUE CLAY</td><td></td><td></td></tr><tr><td>8</td><td>190</td><td>205</td><td>GREEN CLAY</td><td></td><td></td></tr><tr><td>8</td><td>205</td><td>235</td><td>BROWN CLAY</td><td></td><td></td></tr><tr><td>8</td><td>235</td><td>330</td><td>BLUE BASALT ROCK w/ FRACTURES</td><td></td><td>✓</td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	8	0	3	TOP SOIL			8	3	5	REDDISH CLAY			8	5	9	FR. BRN ROCK			8	9	15	BLUE BASALT			8	15	20	BLUE BASALT			8	20	38	TAN CLAY			8	38	63	GREEN CLAY			8	63	75	BLUE BASALT			8	75	95	SANDY BRN ROCK			8	95	100	BLUE BASALT			8	100	170	BLUE BASALT			8	170	180	GREEN CLAY			8	180	190	BLUE CLAY			8	190	205	GREEN CLAY			8	205	235	BROWN CLAY			8	235	330	BLUE BASALT ROCK w/ FRACTURES		✓
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		10. DRILLERS CERTIFICATION 1/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>DETAY DRILLING</u> Firm No. <u>150</u> Address <u>1036-1544</u> Date <u>10/18/88</u> Signed by (Firm Official) <u>W. C. Deary</u> and (Operator) <u>W. C. Deary</u>																																																																																																											
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>8 1/2 inches</td><td>8 5/8</td><td>2</td><td>80</td></tr></tbody></table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☐ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches <table border="1"><thead><tr><th>Number</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Well screen installed? ☐ Yes ☐ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☐ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth _____ Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding clay ☐ _____ Sealing procedure used: ☒ Slurry pit ☐ Temp. surface casing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port <u>WELL CAP</u>		Thickness	Diameter	From	To	8 1/2 inches	8 5/8	2	80	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location. <table border="1"><tr><td>N</td><td></td><td></td><td></td><td></td></tr><tr><td>W</td><td></td><td></td><td></td><td>E</td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td><td></td><td></td></tr></table> Subdivision Name _____ Lot No. _____ Block No. _____ County <u>LATAH</u> <u>SW 1/4 SW 1/4 Sec. 27, T. 40 N, R. 2 W</u>		N					W				E											S																																																																	
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USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

State of Idaho
Department of Water Resources
WELL INSPECTION FORM

This form should be completed by the examiner when conducting a field examination to determine the extent of beneficial use of water from a well or whenever a well is inspected for other reasons. The form should be forwarded to Groundwater Protection Section in the State Office upon completion.

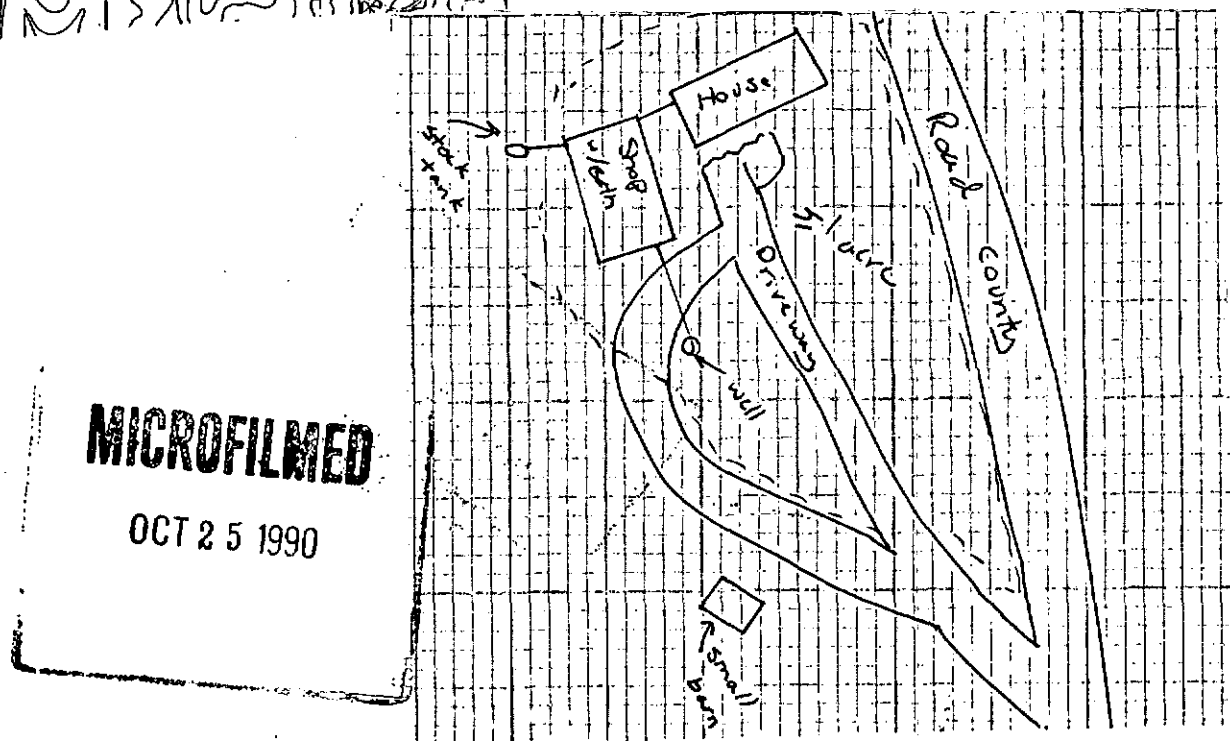
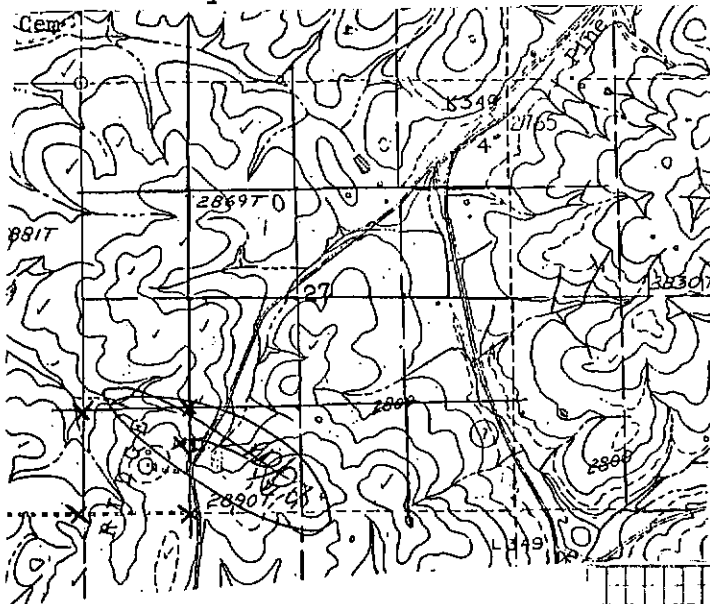
1. Legal Description of well location. Twp. 40N, Rge. 2W,
Sec. 27, Qtr./Qtr. SWSW or Lot _____
2. Owner Fred Funke
Address Rt 1 Box 61F, City Deary, State Id
3. Approx. date of well construction 1982
Well Driller Detray Drilling
4. Casing: Diameter 8 Condition good
5. Casing length above land surface 1'
6. Well depth (ft) 330' Flowing _____ Temp. _____
Access port _____
7. Condition of piping and valving good
8. Evidence of well seal yes
9. Shut in pressure or static water level 100'?
10. Evidence of leakage around the casing no
11. Does well need repair no
12. Comments none

(OVER)

RECEIVED

OCT 25 1990

Provide a schematic diagram showing the location of the well in the quarter-quarter with respect to houses, roads, other wells or readily identifiable features.



Inspected by Z. S. [Signature]

Date 7/17/89

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

COMMENCEMENT OF WORKS

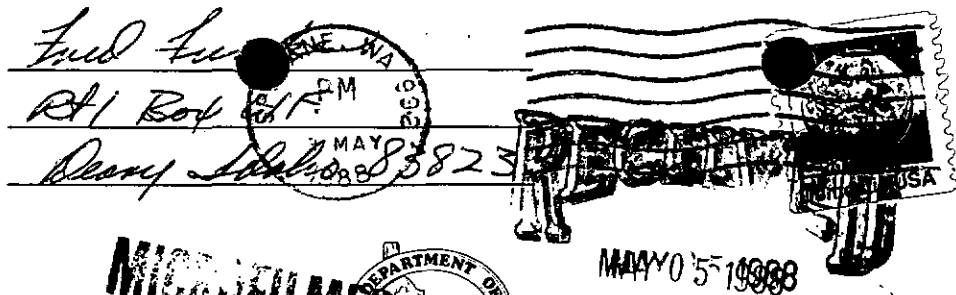
Permit No. 86-7233
Name(s) of Permit Holder(s): FRED FUNKE
Post Office Address: PT 1 BOX 61F
DEARY Idaho Tel. No. 877-1698

- ☐ I hereby certify that construction of diversion works for the above referenced permit began on 5-25-1982 (date) and I understand that I must continue to develop the water system with due diligence to maintain a valid permit. Completed ENTIRE system - 1985
- ☐ I hereby certify that construction of diverting works on the above referenced project has not yet begun due to the following reason beyond my control*:

*Note: A financing difficulty is
not an acceptable reason.

Date

Fred Funke
Signature of Permit Holder



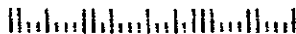
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OCT 25 1990



Department of Water Resources

IDAHO DEPARTMENT OF WATER RESOURCES
STATEHOUSE
BOISE, IDAHO 83720





State of Idaho

DEPARTMENT OF WATER RESOURCES

NORTHERN REGION, Suite No. 9 • 4055 Government Way • Coeur d'Alene, Idaho 83814 • (208) 765-4639

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

November 4, 1988

Mr. Fred Funke
Rt. 1 Box 61F
Deary, Id. 83823

Re: 86-7233

Dear Permitholder:

We acknowledge receipt of your statement of completion of water development use for the above-referenced permit.

Before a license can be issued, a field examination must be made by a representative of this Department. We do not know at this time when he will be able to conduct the examination; however, the examiner will try to contact you at the time he makes the examination so that you may show him the system. If you will not be available to show the system, please provide this office with the name and address of someone who will be able to do so. Your permit will remain valid until the examination is made.

If you have any questions concerning the field examination, please contact this office. Please be sure to use the above-referenced permit number in all future correspondence concerning this examination.

Sincerely,

/s/
TOM D. KING
Senior Water Resource Agent

TDK/pms

MICROFILMED

DEC 22 1988

1/88

PROOF OF BENEFICIAL USE

ANALYSIS SHEET

Permit No. 86-7233

Date: 10/24/88

General Considerations:

Y Name same as permit
Y Signature the same as permit holder
N Address change _____ If yes, prepare a data entry
Y Proof received timely _____
_____ Reinstated

Source of Water:

_____ Surface water
Y _____ Groundwater
_____ Y 1. well log in file
_____ N/A 2. drilling permit
_____ A. amount of drilling fee paid for proposed uses

Extent of Use and Rate of Diversion:

Y Rate of diversion appropriate for uses
_____ Y Is rate or volume and fee appropriate?
N Has permit holder indicated when water was first put to a beneficial use?

Measuring Device:

_____ Is a measuring device or access port required?
N/A Has one been installed?
_____ Waiver or modification of measuring device requested

Remarks:

Proof acceptable

N/A Priority Calculation:
Date proof received _____

Date proof due _____

No. of days late _____

Priority date _____

NEW PRIORITY DATE _____

SEND FILES TO DATA ENTRY AND THEN TO MICROFILM

RECEIVED

MAY 13 1988

For Office Use Only
Fee Received 50.00
Date 5/10/88
Receipt # 159
Receipt by [Signature]
Reviewed by [Signature]
Sent to region

RECEIVED
MAY 19 1988

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES
DEPARTMENT OF WATER RESOURCES
PROOF OF BENEFICIAL USE

The Idaho Department of Water Resources will consider this form as a statement that the permit holder(s) has completed all development that will occur under this permit and that water has been applied according to the provisions of the permit for the beneficial use(s) described below. This form must be accompanied by a license examination fee or a completed field examination report prepared by a certified water right examiner who has been appointed by the department.

Permit No. 86-7233-1
Name(s) of Permit Holder: FRED FUNKE or Patricia A Funke ^{wife}
Post Office Address: RT 1 Box 61F Deary Idaho 83823
Telephone No. 877-1698

Source of Water: Well & Pump

Extent of Use:
Domestic ~~1~~ 1 one (number of households) Stockwater 7 or 8 ^{Horses & Cattle} (number and type of stock)
Irrigation ~~1~~ 7 (acres) Other/Remark Commercial use

Domestic supply for use & small shop that is used sometimes

Total rate and/or volume for which proof is submitted 0.14 cts Per App. for Permit acre-feet

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

Measuring Device: Required? Yes X No
Installed? Yes No
Fee enclosed \$ \$5000.00
(See License Examination Fee Schedule)

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

Person to contact to accompany the Department representative during the field examination:
FRED Funke (Deary 877-1698 Home)
(Name) (Telephone Number)

(WORK 882-4960 Moscow) RT 1 Box 61F Deary
(Address) 83823

The above information is my true statement of the extent to which the above numbered permit has been developed and I relinquish any undeveloped portion of the permit to the state of Idaho.

5-8-88 Lued Funke
Date Signature of Permit Holder (and title, if appropriate)

RECEIVED
DEC 22 1988

To: File 86-7233

From: Groundwater Protection

Date: 10/25/84

Drilling Permit: ☒ Not Applicable
☐ Found and in file
☐ Not Found

Well Drillers Report:

☐ Not found, due to reported age of well
probably not available
☒ Found and is in file
☐ Not found

Follow-up

☐ Request from permit holder the well
drillers report and/or the name of the
well driller, *And date drilled.*
☐ Ask permit holder when well was drilled
and notify holder of drilling permit
requirement if after July 01, 1987.

OK

JTB

MICROFILMED

DEC 22 1988

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR

BALLPOINT PEN

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.

OCT 24 1988

1. WELL OWNER

Name Fred J. J. J.Address IdahoOwner's Permit No. 86-7233

7. WATER LEVEL

Static water level _____ feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ OF. Quality _____
Describe artesian or temperature zones below.

2. NATURE OF WORK.

- ☒
- New well
- ☐
- Deepened
- ☐
- Replacement
-
- ☐
- Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ Other _____

Discharge G.P.M.

Pumping Level

Hours Pumped

30 GPM320

3. PROPOSED USE

- ☒
- Domestic
- ☐
- Irrigation
- ☐
- Test
- ☐
- Municipal
-
- ☐
- Industrial
- ☐
- Stock
- ☐
- Waste Disposal or Injection
-
- ☐
- Other _____ (specify type)

4. METHOD DRILLED

- ☒
- Rotary
- ☐
- Air
- ☐
- Hydraulic
- ☐
- Reverse rotary
-
- ☐
- Cable
- ☐
- Dug
- ☐
- Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
<u>3/8</u> inches	<u>8 3/8</u> inches	<u>2</u> feet	<u>80</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used? ☒ Yes ☐ NoWas a packer or seal used? ☐ Yes ☐ NoPerforated? ☐ Yes ☒ NoHow perforated? ☐ Factory ☐ Knife ☐ Torch

Size of perforation _____ inches by _____ inches

Number	From	To
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet

Well screen installed? ☐ Yes ☐ No

Manufacturer's name _____

Type _____ Model No. _____

Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? ☐ Yes ☐ No ☐ Size of gravel _____

Placed from _____ feet to _____ feet

Surface seal depth _____ Material used in seal: ☐ Cement grout☒ Bentonite ☐ Puddling clay ☐ _____Sealing procedure used: ☒ Slurry pit ☐ Temp. surface casing☐ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

Weld _____

☐ Cemented between strataDescribe access port WELL CAP

9. LITHOLOGIC LOG

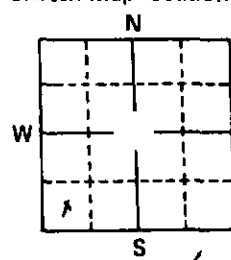
Bore Diam.	Depth		Material	Water Yes No
	From	To		
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8	5	9	FR. BRN ROCK	
8	9	15	BLUE BASALT	
8	15	20	BLUE BASALT	
8	20	38	TAN CLAY	
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8	170	180	GREEN CLAY	
8	180	190	BLUE CLAY	
8	190	205	GREEN CLAY	
8	205	235	BROWN CLAY	
8	235	330	BLUE BASALT ROCK w/ FRACTURES	✓

10.

Work started 5/25/82 finished 6/2/82

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____

Lot No. _____ Block No. _____

County LATAHSW 1/4 SW 1/4 Sec. 27, T. 40 N, R. 2 E

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name DETROY DRILLING Firm No. 150Address 1036-1546 CHARKS RD Date 10/18/88Signed by (Firm Official) W. C. Dearyand
(Operator) W. C. Deary



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720 - (208) 334-7900

CECIL D. ANDRUS

GOVERNOR

R. KEITH HIGGINSON

DIRECTOR

September 30, 1988

W. DeTray
DeTray Drilling
1036 15th Street
Clarkston, WA 99403

RE: Funke Well
SW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec. 27, T40N, R2W
86-7233

Dear Mr. DeTray:

Please submit a drilling report for the Funke well. I do not know when the well was drilled.

Please submit the report within 30 days.

Sincerely,

A handwritten signature in cursive script that reads "John E. Beal".

JOHN E. BEAL, Manager
Groundwater Protection Section

JEB:ldt(GP12-1.140)

MICROFILMED

DEC 22 1988



State of Idaho
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720 - (208) 334-7900

RECEIVED
SEP 22 1988

CECIL D. ANDRUS
GOVERNOR
R. KEITH HIGGINSON
DIRECTOR

September 14, 1988

Department of Water Resources

Fred and Patricia Funke
Rt. 1, Box 61F
Deary, ID 83823

RE: Permit No. 86-7233

Dear Permit Holder:

The department received your Proof of Beneficial Use form, however, before completing processing, additional information is needed.

If you have a well driller's report, please send a copy to the department. If you do not have one, please let me know who drilled the well and when it was drilled.

Please remit the requested information by October 14, 1988 to keep your permit in good standing.

If you have any questions, feel free to call me.

Sincerely,

RITA FLECK
Secretary/Records Manager

c: N. Region

MICROFILMED
DEC 22 1988

PRINTCRAFT

September 14, 1988

Fred and Patricia Funke
Rt. 1, Box 61F
Deary, ID 83823

RE: Permit No. 86-7233

Dear Permit Holder:

The department received your Proof of Beneficial Use form, however, before completing processing, additional information is needed.

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Sincerely,

RITA FLECK
Secretary/Records Manager

c: N. Region

MICROFILMED

DEC 22 1988

To: File 86-7233

From: Groundwater Protection

Date: 9/6/88

Drilling Permit: ☒ Not Applicable
☐ Found and in file
☐ Not Found

Well Drillers Report:

☐ Not found, due to reported age of well
probably not available
☐ Found and is in file
☒ Not found

Follow-up

☒ Request from permit holder the well
drillers report and/or the name of the
well driller.
☐ Ask permit holder when well was drilled
and notify holder of drilling permit
requirement if after July 01, 1987.

*well drilled in 1981. Owner
may know who drilled*

MICROFILMED

DEC 22 1988



State of Idaho
DEPARTMENT OF WATER RESOURCES

NORTHERN REGION, Suite No. 9 • 4055 Government Way • Coeur d'Alene, Idaho 83814 • (208) 765-4639

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

April 28, 1988

Mr. Fred Funke
Rt. 1 Box 61F
Deary, Id. 83823

Re: 86-7233

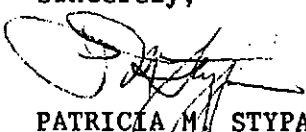
Dear Mr. Funke:

Pursuant to our telephone conversation today, enclosed please find a Beneficial Use Statement and instructions.

If your system is complete for all the uses you applied for in the above-referenced permit, you may fill out this Beneficial Use form now instead of waiting five years.

If you have any questions, please contact this office.

Sincerely,


PATRICIA M. STYPA
Secretary/Office Coordinator

Enc. - Beneficial Use Statement
Instructions

MICROFILMED

DEC 22 1988

Celebrate
IDAHO
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S T A T E O F I D A H O
DEPARTMENT OF WATER RESOURCES

STATEHOUSE
BOISE, IDAHO 83720
(208) 334-4440
APRIL 01, 1988

FUNKE, FRED
RT. 1 BOX 61F
DEARY, ID 83823

PERMIT APPROVAL NOTICE

RE: PERMIT NO. 86-7233

DEAR PERMIT HOLDER:

ENCLOSED IS A COPY OF YOUR APPROVED APPLICATION FOR PERMIT. WE DIRECT YOUR ATTENTION TO THE CONDITIONS OF APPROVAL ON THE FOURTH PAGE.

PLEASE NOTE THE REQUIREMENT THAT AS A PERMIT HOLDER YOU MUST COMMENCE THE EXCAVATION OR CONSTRUCTION OF DIVERTING WORKS WITHIN ONE YEAR OF THE DATE THE PERMIT WAS ISSUED, AND YOU MUST PROCEED DILIGENTLY UNTIL THE PROJECT IS COMPLETED. THE ENCLOSED BLUE CARD MUST BE COMPLETED AND RETURNED TO THIS OFFICE AS SOON AS YOU COMMENCE CONSTRUCTION, NO LATER THAN ONE YEAR FROM THE DATE THE PERMIT WAS APPROVED.

WE HAVE ENCLOSED A FORM ENTITLED "INSTRUCTIONS FOR PROOF OF BENEFICIAL USE". PLEASE READ THE INSTRUCTIONS CAREFULLY SINCE YOU MUST TAKE FURTHER ACTION TO DEVELOP THIS PERMIT INTO A LICENSE.

SINCERELY,

GARY SPACKMAN
SUPERVISOR, WATER ALLOCATION SECTION

GS: SC
ENCLOSURES

MICROFILMED
DEC 22 1988

State of Idaho
Department of Water Resources

APPLICATION FOR PERMIT ANALYSIS SHEET

INITIAL REVIEW BY: JK APPLICATION NUMBER: 86-7233

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.

Field check by: _____

Date: _____

Comments: _____

☒ 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.

*REQUEST THE FOLLOWING ADDITIONAL INFORMATION FROM THE APPLICANT: _____

SEND COPIES TO:

- ☐ Idaho State Health Department. Copies sent by: _____ Date: _____
☐ Idaho Fish and Game Department. _____
☐ Idaho Department of Lands. _____
☐ U.S. Bureau of Land Management. _____
☐ U.S. Forest Service. _____
☐ Other _____

PROCESSING:

☐ Yes ☐ No Platted by: _____ Map No. _____
☐ Yes ☐ No Other rights on same place of use. _____

☒ Yes ☐ No* In form for advertising.

Final date for protests: 3/7/88

☐ Yes ☒ No Protests received. If yes, record information on 4th page of application.

FINAL REGIONAL PROCESSING REVIEW:

☒ Affidavit of publication received. Date: 2/29/88

☒ 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? _____

2/1/88 Date of priority recommended.

Special conditions of approval or cover letter. _____

allow 2 yrs. for B/U development

By: RNA Date: 3/11/88

STATE OFFICE REVIEW:

223 417

N/A well in 1981
26

RECEIVED

☐ See attached sheet for more information.

By: KW Date: 3/21/88

MAR 16 1988

86-7233

FUNKE, FRED

RT. 1 BOX 61F. DEARY, ID 83823

Source: GROUNDWATER

Diversion Pt: SWSW Sec 27 T 40N R 02W

Use: IRRIGATION	(0.140 CFS)
STOCKWATER	(0.020 CFS)
COMMERCIAL	(0.020 CFS)
DOMESTIC	(0.040 CFS)

Date Filed: 02/01/1988

In: SWSW Sec 27 T 40N R 02W FOR 7 ACRES

MICROFILMED

DEC 22 1988

IDENT. NO. 86-7233

WATER RIGHT
DATA ENTRY LOG

Date _____

Item



2/11/88

Original form entered

Edit Report Correct

Date Protested

Date of Hearing

Date Approved/Denied
(Proof due date, stage and/or status,
conditions of approval, water district)

Kw

5/19/88

Record Verified

Amendment Approved

Extension Approved

Partial Proof

Proof Complete

Field Exam Received

Field Exam Accepted
and changes entered

License Updated

Transfer Updated

Keypunched by State Office
