

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 63-34602
Exam Date: 04/16/2024

1. Current Owner:
RICHARD & ODETTE MASKELL FAMILY TRUST 4336 N STAR VISTA LN EAGLE ID 83616-4540
2. Accompanied by: in office
Phone No:
Address:
Relationship to permit Holder:

3. **SOURCE:**
GROUND WATER

Method of Determination: application and permit

B. OVERLAP REVIEW

1. Other water rights with the same place of use: YES Overlap

Water Right No.	Source	Purpose of Use	Basis
63-12448	Ground water	Municipal	License
63-11413	Ground water	Municipal	License
63-32089	Ground water	Municipal	Permit
63-32573	Ground water	Municipal	Permit
63-33876	Ground water	Municipal	Permit
63-33878	Ground water	Municipal	application

Comments: City of Eagle municipal rights

2. Other water rights with the same point-of-diversion: NO Overlap

Water Right No.	Source	Purpose of Use	Basis

Comments: NA

C. DIVERSION AND DELIVERY SYSTEM

1. **LOCATION OF POINT(S) OF DIVERSION:**
GROUND WATER NE¼ NE¼, Sec. 33, Twp 05N, Rge 01E, B.M. ADA County

Method of Determination: application, permit, Well log

PLACE OF USE: DOMESTIC

Twp	Rng	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
05N	01E	33	X																

Method of Determination: application permit, ArcMap and Ada County

3.

Delivery System Diagram Attached (required). Indicate all major components and distances between components. Indicate weir size/pipe as applicable.



Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.

Aerial Photo Attached (required for irrigation of 10+ acres).

Photo of Diversion and System Attached

4.

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

D. FLOW MEASUREMENTS

1.

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

2. Measurements:

E. FLOW CALCULATIONS

Additional Computation Sheets Attached

Measured Method:

F. VOLUME CALCULATIONS

1. Volume Calculations for irrigation:

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

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

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

2. Volume Calculations for Other Uses: domestic use, indoor and up to ½ acre of irrigation. 1.2 af per Administrative Application Processing memo # 22.

G. NARRATIVE/REMARKS/COMMENTS: : ArcMap and Ada County show dwelling on property and list permit holder as current owner. This was permitted for domestic, irrigation and stockwater. The proof stated that only the domestic was developed and only 0.01 cfs was being used. I could only find that approximately 0.5 acres had been irrigated around the house. The irrigation and stockwater use were not developed and should not be on the license. The rate and volume should be the standard 0.04 cfs and 1.2 af.

The POU of this right overlaps with municipal rights from the City of Eagle.

Permit conditions 046, X02 and 26A should be removed per standard policy. Condition R69 should be removed because the irrigation use was not developed. Condition 132 should be replaced with X01 and 187 since only domestic use was developed. Condition 121 should be replaced with 103. Condition X59 and X60 should be added to designate which lot the home is located within. Conditions 930 and 165 should remain on the license because the point of diversion is within the area that shallow ground water is tributary to the Boise River.

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

H. RECOMMENDATIONS

1. Recommended Amounts

<u>Beneficial Use</u>	<u>Period of Use</u>	<u>Rate of Diversion</u>	<u>Annual Volume</u>
DOMESTIC	01/01 to 12/31	0.04 CFS	1.2 AF
<u>Totals:</u>		0.04 CFS	1.2 AF

2. Recommended Amendments

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

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

I. AUTHENTICATION

Jean Hersley -

Field Examiner's Name Jean Hersley Date 4-16-24

Reviewer P. H. H. Date 4/26/24

Parcel: **R8108830600**

Year: 2024 ▼

Parcel Status: **Active**

Property Details

Primary Owner: MASKELL RICHARD & ODETTE FAMILY TRUST

Address: 4336 N STAR VISTA LN EAGLE, ID 836160000

Instrument #: 114046324

Subdivision: STARVIEW ESTATES SUB

Assessor ID: LOT 06 BLK 01 STARVIEW ESTATES SUB

Township/Range/Section: 5N1E33

Land Group Type: SUB

Zone Code: RUT

Total Acres: 5.558

Tax Code Area: 270

Ada County Assessor



Valuation

Valuation Details

Roll	State Category Code	Acreage	Assessed Value	Valuation Method	Code Area
Property	150	5.558	546200	MARKET	270
Property	320	0.000	1064900	COST	270

Unlited - ArcMap

File Edit View Bookmarks Insert Selection Geoprocessing Customize Windows Help

Process POU POD Wells SC WMIS Dam Safety UIC WRA Enforcement Tools Editor

Identify

Identify from: Parcels

Parcels

MASKELL RICHARD B ODETTE FAMILY TRUST; MASKELL RICHARD N TRUSTEE

Location: 2,311,879.975 1,355,076.209 Meters

Field	Value
ID	16608159
UPDATED	1/10/2024
PIN	R8108830600
OWNER	MASKELL RICHARD B ODETTE FAMILY TRUST; MASKELL RICHARD N TRUSTEE
ADDRESS1	4336 N STAR VISTA LN
ADDRESS2	<null>
CITY	EAGLE
STATE	ID
ZIPCODE	83616-4540
P_ADDRESS	4336 N STAR VISTA LN
P_ZIPCODE	83616-0000
SUB_NAME	STARVIEW ESTATES SUB
LEGAL1	LOT 06 BLK 01
LEGAL2	STARVIEW ESTATES SUB
LEGAL3	
LEGAL4	
LEGAL5	
LEGAL6	<null>
ACRES	5.6
COUNTY	Ada
SOURCE	<null>
YEAR_BUILT	2014

Identified 1 feature

2312053.807 1995226.228 Meters

ArcMap shows dwelling on property and lists permit holder as current owner.

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0066085

Drilling Permit No. 965147-87147
Water right or injection well # _____

2. OWNER:

Name Dick Maskell
Address 4336 N. Star Vista Ln.
City Eagle State ID Zip 83616

3. WELL LOCATION:

Twp. 5 North ☒ or South ☐ Rge. 1 East ☒ or West ☐
Sec. 33 1/4 NE 1/4 NE 1/4Gov't Lot _____ County Ada
Lat. 43 43.999 (Deg. and Decimal minutes)
Long. 116 20.179 (Deg. and Decimal minutes)
Address of Well Site 4336 N. Star Vista Ln.
City Eagle

(Give at least name of road & distance to road or landmark)

Lot. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☒ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method/procedure
3/8bentonite	0	40	3000lbs	dry pour
cem/ben	165	210	28.8cu/ft	tremie

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing Liner	Threaded	Welded
10"	+2	245	.250	steel	☒	☐	☒
4.5"	6	240	sdr-17	pvc	☐	☒	☐
					☐	☐	☐
					☐	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 245ft

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____Manufactured screen ☒ Y ☐ N Type pvcMethod of installation placed

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
240	400	.020	---	4.5"	pvc	sdr-17

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
10/20	210	400	72cu/ft	dry pour

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device _____

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 190ft Static water level (ft) 190ft
Water temp. (°F) 61degF Bottom hole temp. (°F) _____
Describe access port sanitary seal

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
40ft	15gpm	60minutes

Test method:

Pump	Bailer	Air	Flowing artesian
☒	☐	☐	☐
☐	☐	☐	☐
☐	☐	☐	☐

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
14"	0	6	hard brown clay		X
"	6	12	coarse sand		X
"	12	36	hard tan clay		X
"	36	45	coarse sand		X
10"	45	48	coarse sand		X
"	48	72	tan sandy clay		X
"	72	81	coarse sand		X
"	81	136	tan sandy clay		X
"	136	148	tan clay		X
"	148	190	sandy tan clay		X
"	190	192	fine sand	X	
"	192	215	sandy tan clay		X
"	215	256	blue clay		X
"	256	265	fine black sand	X	
"	265	310	blue clay with fine sand streaks	X	
"	310	311	fine black sand	X	
"	311	378	blue clay with fine sand streaks	X	
"	378	382	fine black sand	X	
"	382	400	blue clay		X

RECEIVED

APR 21 2014

WATER RESOURCES
WESTERN REGIONCompleted Depth (Measurable): 400ftDate Started: Dec 4, 2013Date Completed: Jan 29, 2014

14. DRILLER'S CERTIFICATION:

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

Company Name Coonse Well Drilling Co. No. 409*Principal Driller [Signature] Date Feb 6, 2014*Driller [Signature] Date Feb 6, 2014

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.