

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 75-15024
Exam Date: 11/03/2023

1. Current Owner:

JUDY JUSTICE PO BOX 261 NORTH FORK ID 83466-0261 OR
JERRY JUSTICE PO BOX 261 NORTH FORK ID 83466-0261

Does this qualify for an in-office field exam (IDAPA 37.03.02.035.01.r)? x Y N

- a. Irrigation of 5 acres or less
- b. Storage of up to 14.6 AF for stockwater purposes only
- c. X Any use other than irrigation or storage, if the combined diversion rate is 0.24 cfs or less
- d. Other < >

3. **SOURCE:**

GROUND WATER

Method of Determination: application, permit and ArcMap

B. OVERLAP REVIEW1. Other water rights with the same place of use: NO Overlap

Water Right No.	Source	Purpose of Use	Basis

Comments: NA

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 SYSTEM1. **LOCATION OF POINT(S) OF DIVERSION:**

GROUND WATER SW¼ NW¼, Sec. 14, Twp 25N, Rge 21E, B.M. LEMHI County

Method of Determination: Application, permit and 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	
25N	21E	14							X										
25N	21E	15				X													

Method of Determination: application, permit and ArcMap

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:

$$V_{IR} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) =$$

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

$$V = \text{Smaller of } V_{IR} \text{ and } V_{DR} =$$

2. Volume Calculations for Other Uses:

Domestic: No volume was added. Permit is limited to 13,000 gallons per day.

G. NARRATIVE/REMARKS/COMMENTS:

This permit qualified for an in-house exam per IDAPA 37.03.02.035.01.r. ArcMap confirmed dwelling on property and Lemh County confirmed dwelling and permit holder as current owner. No volume was added due to the condition that limits permit to 13,000 gallons per day. There are no overlapping rights. This right is currently within WD 170.

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>	
DOMESTIC	01/01 to 12/31	0.03 CFS	

Totals: 0.03 CFS

2. Recommended Amendments

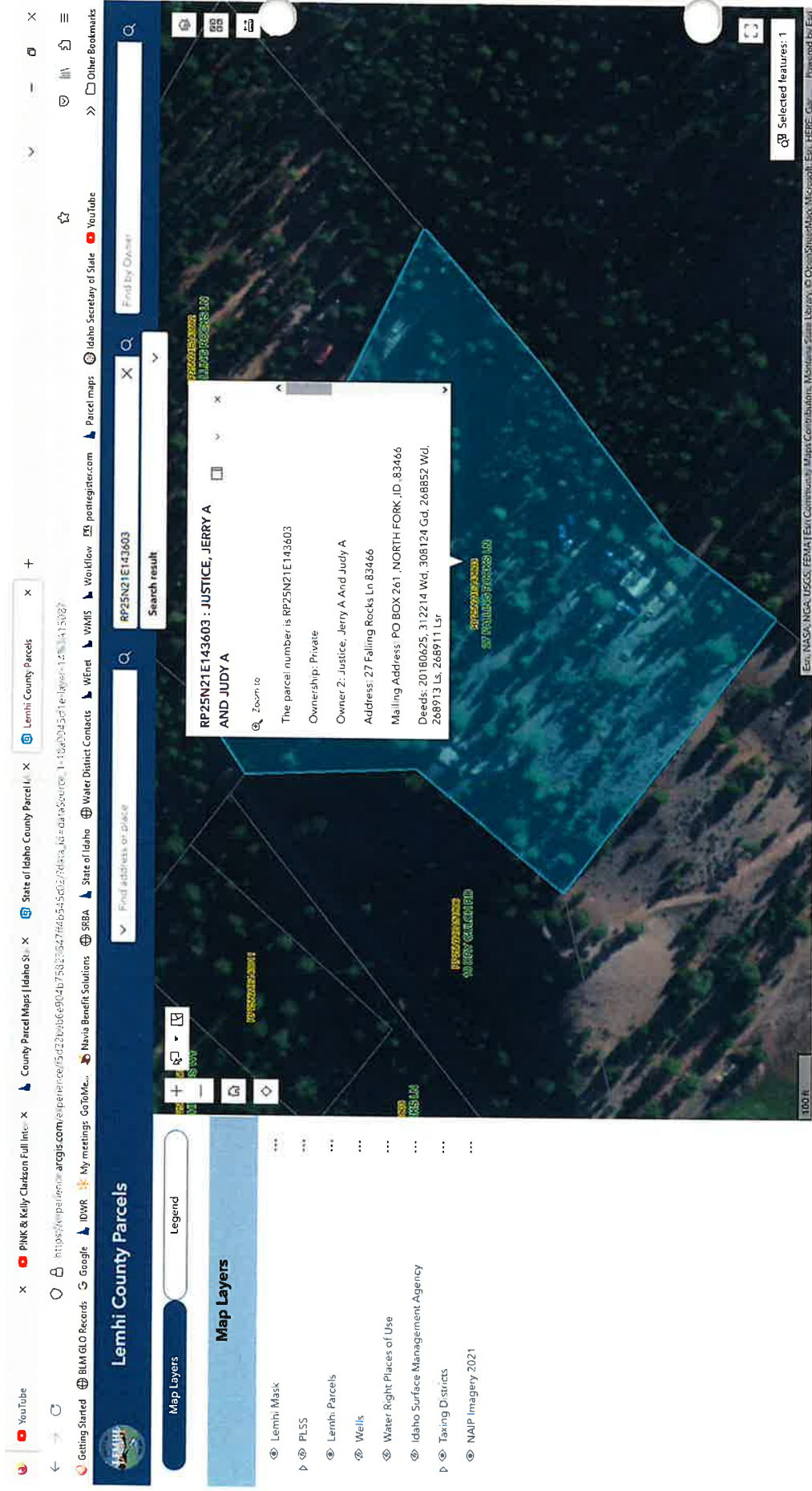
☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☒ None

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

I. AUTHENTICATION

Jean Hersley -

Field Examiner's Name Jean Hersley Date 11-3-23Reviewer PD Date 11/8/23



Lemhi County shows dwelling on parcel and list permit holder as current owner.



2503689.945 1588402.942 Miles

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0078118

Drilling Permit No. 887066

Water right or injection well # _____

2. OWNER:

Name Judy Justice

Address 2070 Geronimo St.

City Chandler State AZ Zip 85225

3. WELL LOCATION:

Twp. 25 North ☒ or South ☐ Rge. 21 East ☒ or West ☐
Sec. 14 1/4 SW 1/4 NW 1/4

Gov't Lot _____ County Lemhi

Lat. 45 ° 29.919 (Deg. and Decimal minutes)

Long. 113 ° 57.194 (Deg. and Decimal minutes)

Address of Well Site 48 Falling Rock Lane

City North Fork

Lot _____ Blk. _____ Sub. Name Sheep Creek

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
Bentonite	0	40	21 bags	Poured

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge Schedule	Material	Casing Liner	Threaded	Welded
6	+2	58	.250	Steel	☒	☐	☒
4	40	300	sch 40	PVC	☐	☒	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 58'

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____

Manufactured screen ☒ Y ☐ N Type PVC

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
300	500	.020		4"	PVC	Sch 40

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
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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) 300' Static water level (ft) 287'

Water temp. (°F) cold Bottom hole temp. (°F) _____

Describe access port WELL CAP

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
N/A	6	60

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
10	0	2	BROWN SILT		X
	2	29	DECOMPOSED BROWN ROCK		X
	29	58	HARD BROWN ROCK		X
6	58	300	HARD BROWN ROCK		X
	300	500	HARD BROWN ROCK	X	

RECEIVED

DEC 27 2018

Department of Water Resources
Eastern Region

Completed Depth (Measurable): 500'

Date Started: 9/13/18

Date Completed: 9/17/18

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 Elsing Drilling & Pump Co Inc Co. No. 669

*Principal Driller [Signature] Date 10/18/18

*Driller [Signature] Date 10/18/18

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.