

Permit No. 13-7985
Name JAMES ALLEN REV
FAMILY TRUST.

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
In-Office Beneficial Use Examination

1. ☒ Copy of Permit
2. ☒ Copy of proof of beneficial use
3. N/A Copies of amendments/orders
4. YES Qualifies under Rule 35.01.r (IDAPA 37.03.02)
5. ☒ Point of Diversion
Township 16S, Range 40E, Section 12, QQ SESW
Method used to determine POD: GIPS
6. ☒ Place of Use
Township 16S, Range 40E, Section 12, QQ SESW
Method used to determine POU: AERIAL IMAGERY
7. ☒ POD and POU match Permit Approval
8. ☒ Aerial photo of place of use
9. N/A Well driller's report
10. ☒ Within a water district? (WD# 13A)
11. N/A Volume Calculation

SINGLE HOME DOMESTIC = 0.04 CFS.
+ 0.6 AF

12. N/A Other information

Examiner Name JAKE NEBEKER

Date

1/29/25

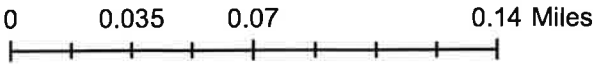
Reviewer

James Cefalo

Date

2/20/25

State of Idaho
Department of Water Resources
Water Right
13-7985



-  Place Of Use Boundary
-  Point of Diversion
-  State Outline
-  Townships
-  PLS Sections
-  Quarter Quarters



Field Exam for Permit 13-7985

Pictures:

Spring; GPS Coordinates 42 02.7872' N 111 43.8560' W



42.046453333
-111.730933333

House



Valve



Drainage pipe (For clearing and cleaning system.)



State of Idaho
Department of Water Resources
Permit to Appropriate Water

NO. 13-07985

Priority: October 17, 2016

Maximum Diversion Rate: 0.04 CFS

This is to certify, that JAMES ALLEN REV FAMILY TRUST
5658 MAPLE CREEK ROAD
FRANKLIN ID 83237

has applied for a permit to appropriate water from:

Source: SPRING**Tributary:** MAPLE CREEK

and a permit is APPROVED for development of water as follows:

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>RATE OF DIVERSION</u>
DOMESTIC	01/01 to 12/31	0.04 CFS

LOCATION OF POINT(S) OF DIVERSION:

SPRING NE¼SE¼SW¼ Sec. 12 Twp 16S Rge 40E, B.M. FRANKLIN County

PLACE OF USE: DOMESTIC

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
16S	40E	12																	X

CONDITIONS OF APPROVAL

1. Proof of application of water to beneficial use shall be submitted on or before **March 01, 2022**.
2. Subject to all prior water rights.
3. Use of water under this right will be regulated by a watermaster with responsibility for the distribution of water among appropriators within a water district. At the time of this approval, this water right is within State Water District No. 13A.
4. Upon specific notification by the Department, the right holder shall install a lockable device of a type acceptable to the Department in a manner that will provide the watermaster suitable control of the diversion.
5. Domestic use is for 1 home and does not include lawn, garden, landscape, or other types of irrigation.
6. The quantity of water under this right for domestic use shall not exceed 13,000 gallons per day.

This permit is issued pursuant to the provisions of Section 42-204, Idaho Code.

Signed this 3rd day of February, 2017.


JAMES CEFALO

Water Resources Program Manager

RECEIVED
Form 12-217 Rev. 9/21

JAN 18 2022

DEPARTMENT OF
WATER RESOURCES

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
STATEMENT OF COMPLETION
FOR SUBMITTING PROOF OF BENEFICIAL USE

FOR OFFICE USE ONLY
Amt. of Fee \$ 50-
Receipt No. C111711
Received By KU
Date Received 1.18.22

The Idaho Department of Water Resources (Department) considers this form a statement that the permit holder(s) applied water to beneficial use and completed development of a water right to the extent described below. **This form must be accompanied by an examination fee, when necessary, or by a completed Beneficial Use Field Report prepared by a certified water right examiner (CWRE).** Please refer to the instructions and fee schedule for this form. If ownership of the permit has changed, complete an Assignment of Permit form. If you wish to relinquish your permit because you have not established the authorized water use and are not applying for an extension, please notify the Department in writing.

1. Permit No. 13-07985 Name of Permit Holder(s) JAMES ALLEN Rev Family TRUST
Telephone No. 208 851 2930 Email warhorse3@att.net
Mailing Address 5658 E. Maple Creek Rd City FRANKLIN State ID Zip 83237

2. Source of Water SPRING If Ground Water (well), Date Drilled mo. ____ / yr. ____
Drilling Permit/Tag No. ____ Drilling Company's Name ____

3. Extent of use(s) completed as authorized by the water right permit:

Domestic (No. households) 1 Irrigation (No. acres) ____ Stockwater (No. and stock type) ____
Other ____

4. Total diversion rate or volume (storage only) for which proof is submitted ____ cfs OR ____ af
If the total developed water use is 5 acres of irrigation or less, is stockwater storage of 14.6 acre-feet or less, or has a diversion rate of less than 0.24 cfs, attach a map of the place of use and point of diversion and photographs showing beneficial use.

5. Describe the diversion and delivery system from the water source to the use (pump, lift, irrigation method, etc.)

pipe to house from spring

6. Permit condition compliance. Refer to the permit approval conditions and check all the items required, then check "Yes" or "No" to indicate whether the required items were established, submitted, and/or installed:

Required? Yes No (If "Yes", attach required data, evidence of compliance, or evidence of installation)

- | | | |
|--------------------------|-------------------------------------|---|
| ☐ | ☒ | Ground water level data, pumping information, or other diversion data |
| ☐ | ☒ | Mitigation plan |
| ☐ | ☒ | Lockable controlling works |
| ☐ | ☒ | Measuring device |
| ☐ | ☒ | Fish screen |
| ☐ | ☒ | Other requirements of the water right permit ____ |
| ☐ | ☒ | Reasonably Anticipated Future Needs ("RAFN") Municipal use |

If RAFN Municipal use, additional increment of beneficial use developed? ☐ Yes (attach CWRE report) ☐ No

7. Fee Enclosed \$ 50.00 or ☐ CWRE field report attached or ☐ No fee required
See fee schedule on page 3 of the instructions. Proof statements filed without an appropriate fee are incomplete.

8. Person to contact to accompany a Department representative during the field examination of the water system:

Name: Jim Allen Telephone No. 208 851 2930 Email warhorse3@att.net
Mailing Address 5658 E. Maple Creek Rd City FRANKLIN State ID Zip 83237

The information given on this form is my true statement of the extent to which the above numbered permit has been developed and water has been diverted and applied to beneficial use. I understand that any undeveloped portion of the permit is relinquished to the State of Idaho.

SIGNATURE OF PERMIT HOLDER*

PRINTED NAME AND TITLE

DATE

*Attach power of attorney if completing on behalf of permit holder.

Jim Allen

owner

1/12/2022