

09/28/2006

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 63-32267

NAME AND ADDRESS: DOUGLAS A BEEHLER
556 W KNOB HILL CT
EAGLE ID 83616

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.060 CFS

The quantity of water under this right shall not exceed 13,000 gallons per day.

PRIORITY DATE: 08/26/2004

POINT OF DIVERSION:

T05N R01E S29 NWSE Within ADA County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

STOCKWATER

01/01 12/31

0.020 CFS

DOMESTIC

01/01 12/31

0.040 CFS

Domestic use is for 1 home.

PLACE OF USE:

STOCKWATER Within ADA County

T05N R01E S29 NWSE

T05N R01E S29 SWSE

DOMESTIC Within ADA County

T05N R01E S29 NWSE

T05N R01E S29 SWSE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

The quantity of water decreed for this water right is not a determination of historical beneficial use.

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

EXPLANATORY MATERIAL: BASIS OF CLAIM - Beneficial Use

Property is also known as Lot 6, Blk 2, Stillwell Estates No. 1.

PARCEL NO: R8163150140.

Stockwater use is for up to 6 head mixed stock.

IDAHO DEPARTMENT OF WATER RESOURCES

Adjudication Claim Report 63-32267

WATER RIGHT NUMBER: 63-32267 ✓

Owner Type

Current Owner

Name and Address

DOUGLAS A BEEHLER
556 W KNOB HILL CT
EAGLE, ID 83616
(208)939-5747

Priority Date: 08/26/2004 ✓

Basis: Beneficial Use ✓

Status: Active

Source

GROUND WATER ✓

Tributary

Beneficial Use

STOCKWATER

DOMESTIC

From To

01/01 to 12/31

01/01 to 12/31

Diversion Rate

0.020 CFS ✓

0.040 CFS ✓

Total Diversion: 0.060 CFS

Location of Point(s) of Diversion

GROUND WATER

ADA County ✓

NW1/4SE1/4 ✓

Sec. 29, Twp 05N, Rge 01E, B.M.

Place of Use

STOCKWATER ✓

Twp	Rge	Sec	NE				NW				SW				✓ SE				
			<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	Totals
✓ 05N	01E	29														X	✗		

DOMESTIC

Twp	Rge	Sec	NE				NW				SW				SE				
			<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	<u>NE</u>	<u>NW</u>	<u>SW</u>	<u>SE</u>	Totals
	05N	01E	29													X	 		

Conditions of Approval:

1. J01 Property is also known as Lot 6, Blk 2, Stillwell Estates #1.

Remarks:

ADD X01- Domestic use is for 1 home.

marks: ADD X01 - Domestic use is for head mixed stock.

ADD X02 - Stockwater use is for 6 ~~range cattle~~

ADD N11 & N13 -

Parcel No: R816315 0140.



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2006 Property Details for Parcel R8163150140

2006

[Change Year](#)

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Details Valuation Tax Districts Taxes Characteristics

Parcel: R8163150140
Year: 2006
Zone Code: RR
Total Acres: 4.96
Tax Code Area: 270
Property Description:
LOT 6 BLK 2
STILLWELL ESTATES #1

Ada County Assessor



[View Interactive Map of this Parcel](#)

Address: 556 W KNOB HILL CT EAGLE , ID 83616
Subdivision: STILLWELL ESTATES NO 01
Land Group Type: SUB
Township/Range/Section: 5N1E29

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Land Characteristics

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Residential Acres: 4.96
Commercial Acres: 0.0
Other Acres Acres: 0.0
Street: None
Utility: None
Water Source:
Sewer: None
SideWalks: N
Curb-Gutters: N
Topography:
View:
Water Influence: Creek or Canal
Water Frontage Feet: 0
Corner: N

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Residential Characteristics

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Year Built: 2003

Year Remodel: 0

Construction Class: 5

Number of Bedrooms: 4

Number of Bathrooms: 4.5

Number of FirePlaces: 2

Air Conditioning: Y

Car Storage Sq Ft #1: 1302

Car Storage Sq Ft #2: 0

General Purpose Building Sq Ft: 0

Porch Sq Ft: 50

Deck Sq Ft: 0

Deck Covered: N

Patio Sq Ft: 400

Patio Covered: N

Pool Sq Ft: 544

Total Sq Ft: 4069

Main Floor Sq Ft: 2605

Upper Floor Sq Ft: 1464

Finished Lower Floor Sq Ft: 0

Unfinished Lower Floor Sq Ft: 0

Finished Basement Floor Sq Ft: 0

Unfinished Basement Floor Sq Ft: 0

Finished Attic Sq Ft: 0

Unfinished Attic Sq Ft: 0

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IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

807508

Office Use Only			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat	:	:	Long
:	:	:	:

1. DRILLING PERMIT NO. 0-0-3-0568 -

Other IDWR No. _____

2. OWNER:

Name Doug Beehler

Address 556 Knob Hill

City Eagle

State ID

Zip 83616

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location

N

W		E	Twp. <u>5</u> North ☒ or South ☐
			Rge. <u>1</u> East ☒ or West ☐
			Sec. <u>29</u> 1/4 NW 1/4 SE 1/4 10 acres 40 acres 160 acres

Gov't lot _____ County Ada

Lat: _____ Long: _____

Address of Well Site 556 Knob Hill

City Eagle

(Give at least name of road + Distance to Road or Landmark)

Lt. 6 Blk. 2 Sub. Name Stillwell Estates

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement etc.)

- ☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

- ☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	20	600Lbs	Dry Pour

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 400ft.

Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	400	.250	Steel	☒	☐	☒	☐
5"	395	400	.188	Steel	☐	☐	☒	☐

Length of Headpipe 5ft Length of Tailpipe _____

9. PERFORATIONS/SCREENS

- ☐ Perforations Method _____
☒ Screens Screen Type johnson

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
400	410	.012	—	5"	SS	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

260ft. below ground

Artesian Pressure _____ lb

Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

- ☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
75GPM	—	395ft	2.5hours

Water Temp. 58DegF

Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encountered 277ft

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water					
Bore Dia	From	To	Remarks: Lithology, Water Quality & Temp.	Y	N
10"	0	2	Top Soil		X
"	2	8	Brown Clay		X
"	8	16	Coarse Sand		X
"	16	20	Sandy Clay		X
6"	20	56	Sandy Clay		X
"	56	75	Sand		X
"	75	114	Tan Clay		X
"	114	127	Sand		X
"	127	145	Tan Clay		X
"	145	160	Sand		X
"	160	218	Tan Clay		X
"	218	242	Sand		X
"	242	268	Sandy Clay		X
"	268	277	Tan Clay		X
"	277	295	Sand	X	
"	295	320	Tan Clay		X
"	320	336	Coarse Sand	X	
"	336	348	Tan Clay		X
"	348	385	Coarse Sand	X	
"	385	386	Sandy Clay		X
"	386	393	Coarse Sand	X	
"	393	394	Blue Clay		X
"	394	399	Fine Blue Sand	X	
"	399	400	Blue Clay		X
"	400	410	Sand	X	

RECEIVED

OCT 14 2003

WATER RESOURCES
WESTERN REGION

Completed Depth: 410

(Measurable)

Date: Started 10-6-03

Completed 10-9-03

13. DRILLER'S CERTIFICATION

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

Firm Name Coonse Well Drilling

Firm No. 409

Firm Official [Signature]

Date 10-9-03

Supervisor or Operator [Signature]

Date 10-9-03

(Sign once if Firm Official & Operator)

Date: 10/9/03 Time: 2:31 PM

References

[Remedy](#)[Administrative Rules](#)[Query Tools](#)[Data Entry Standards](#)Screen
ID 394Process:
Receipt
SearchStep:
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Detail

Receipt Details for ID W033935

Status	Adjustment Type	Version
		2

General Information:

Date Received	Date Deposited	Region	Total Amount
3/10/2006 12:58:10 PM		WESTERN	\$130.00
Payer		BEEHLER, DOUGLAS A	

Account Information:

Check #	Account #	Credit Card Name	Aut
6634			
Card Expiration Date	Credit Card Transaction #		

Comment NOTICE OF CLAIM; 63-3016, 63-3483, \$ 63-32267

$$W \quad T$$
$$\$54.00 + \$51.00 + \$25.00 = \$130.00$$

Fee Detail:

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$130.00	ADJUDICATION FILING FEE	42503	0337			1155

Refund(s):

Amount	Payee	Date	Document Number
--------	-------	------	-----------------

Water Right Information:

Basin Number	Sequence Number	Split Suffix	Amount	Type
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[Hide References](#)[Next Step](#)[Return to Home](#)[Previous Steps:](#) [Select Receipt](#)

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number 63-32267
Date Received: 3/10/2006
Receipt No:
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

DOUGLAS A BEEHLER
556 W KNOB HILL CT
EAGLE ID USA 83616

Phone: (208) 939-5747

2. Date of Priority: 08/26/2004

3. Source: GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
05N	01E	29	NW SE	ADA	

5. Description of diverting works:

436 ft well, 8-10 inch casing, w/pipeline to place of use.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	01/01	12/31	0.02	
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:
0.06 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:
Number of other uses: 6 Head
Number of homes: 1

10. Place of use:

Township	Range	Section	1/4	of 1/4	Lot	Use	Acres
05N	01E	29	NW	SE		STOCKWATER	
			SW	SE		STOCKWATER	
			NW	SE		DOMESTIC	
			SW	SE		DOMESTIC	

11. Place of use in counties: ADA

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used:

14. Remarks:

Property is also known as Lot 6, Blk 2, Stillwell Estates #1.

15. Basis of Claim: Beneficial Use

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number 63-32267
Date Received: 3/10/2006
Receipt No: W033935
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name of Claimant(s)

DOUGLAS A BEEHLER Phone: (208) 939-5747
556 W KNOB HILL CT
EAGLE ID USA 83616

2. Date of Priority: 08/26/2004

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
05N	01E	29	NW SE	ADA	

5. Description of diverting works:

436 ft well, 8-10 inch casing, w/pipeline to place of use.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or) A.F.A
STOCKWATER	01/01	12/31	0.02	
DOMESTIC	01/01	12/31	0.04	

7. Total Quantity Appropriated is:
0.06 C.F.S.

8. Total consumptive use:

9. Non-irrigation uses:
Number of other uses: 6 Head
Number of homes: 1

10. Place of use:

Township	Range	Section	1/4 of 1/4	Lot	Use	Acres
05N	01E	29	NW	SE	STOCKWATER	
			NW	SE	DOMESTIC	

11. Place of use in counties: ADA

12. Do you own the property listed above as place of use? Yes

13. Other Water Rights Used: 63-3016W & 63-3483T for irrigation

14. Remarks:

Property is also known as Lot 6, Blk 2, Stillwell Estates #1.

15. Basis of Claim: Beneficial Use

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. 63-32267
Date Received 3-10-06
Receipt Number W033935

NOTICE OF CLAIM
TO A
WATER RIGHT

RECEIVED

MAR 10 2006

WATER RESOURCES
WESTERN REGION

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) DOUGLAS A. BEEHLER Phone (208) 939-5747
Mailing Address 556 W. KNOB HILL CT, EAGLE ID Zip 83616
2. Date of Priority (Only one per claim) GROUNDWATER Month/Day/Year 8/26/2004
3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source
4. Location of point of diversion is: Township 5N Range 1E
Section 29, — 1/4 of NW 1/4 of SE 1/4, Govt. Lot _____, BM.,
County of ADA
Additional points of diversion if any: _____
5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. 436' DEEP, 8"-10" CASED WELL W/ PIPELINE TO
BACK OF USE.
6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)
For DOMESTIC purposes from 1-1 Month/Day to 12-31 Month/Day amount .04 (cfs)
For STOCKWATER purposes from 1-1 (Both dates are inclusive) to 12-31 amount .02
7. Total quantity claimed .06 (cfs)
8. Total consumptive use claimed is de minimus
9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) STOCKWATER - 6 HEAD, DOMESTIC - 1 HOME

10. Place of use is: Township: 5N Range 1E
Section 29, NW 1/4 of SE 1/4, Govt. Lot _____, B.M.,
for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any 5N 1E 29 SW SE

11. In which county (ies) are lands listed above as place of use located? ADA

12. Do you own the property listed above as place of use? Yes X No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.
None or 63-3016 + 63-3483 FOR IRRIGATION

14. Remarks: AKA LOT 4 BLK 2 JUNKWELL #1

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree
Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understood the form entitled "How you will receive notice in the Snake River Basin Adjudication". (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of Attachments _____

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Douglas Beekley Date 3/8/06

Date _____

For Organizations: I do solemnly swear or affirm that I am _____

of _____, that I have signed the foregoing

document in the space below as _____ of _____

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/or _____)

County of ADA) ss.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 8th day of March 2006

Notary Public Ian Shurte

Residing at Meridian ID

My Commission Expires 9-14-2006

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant



