Form 235-1
7/90

Drilling Permit No. 63-92-W-0742-CCO
Water Right Permit No. _____
Injection Permit No. _____

State of Idaho
Department of Water Resources

APPLICATION FOR DRILLING PERMIT

1. **Applicant (please print)** Willie Joe OR Verna Thompson

2. **Mailing Address** 20325 Batt Corner Road
Wilder, Idaho 83676 Telephone (208) 482-7666

(X) Well Owner ( ) Well Operator ( ) Other, specify _____

3. **Proposed well location** ~~NE~~ NE 1/4 ~~SW~~ SW 1/4, or Gov't Lot No. _____

Sec. 22, Twp. 4N, Rge. ~~5W~~ 5W, County Canyon

Street Address of Well Site 20325 Batt Corner Road

Lot, block and subdivision See Exhibit "A"

4. **Proposed use of well:**

(X) Domestic: The use of water for homes, organization camps, public campgrounds, livestock and for any other purpose in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in excess of 13,000 gpd; or any other uses, if the total use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

Domestic does not include water for multiple ownership subdivisions, mobile home parks, commercial or business establishments, unless the use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

( ) Non-Domestic: Any beneficial use not included within the definition of domestic.

( ) Injection

( ) Monitoring - A well bore schematic and map is required for each well.
No. of proposed wells: _____

5. **Well construction information:**

A. ( ) New well ( ) Deepen (X) Replace - See Condition 9

B. Proposed Surface Diameter 6" Proposed Maximum Depth 200'

C. Anticipated bottom hole temperature:

(X) 85°F or less (Cold water well)
( ) 85°F to 212°F (Low temp. geothermal well)
( ) 212° or more (Geothermal well)

6. **Construction Start Date** ASAP

7. **Anticipated Well Driller** Riverside Drilling #333
NOTE: The actual well driller must be identified prior to drilling.

8. **Applicant's signature** Willie Joe Thompson Date 9-1-92

Title Owner
(Owner, Firm Representative, Other)

ACTION OF THE DEPARTMENT OF WATER RESOURCES

This Permit is APPROVED. Date 9-2-92

If approved, this permit authorizes the constuction or modification of a well subject to the following conditions. READ CAREFULLY!

GENERAL CONDITIONS:

1. The well must be constructed in compliance with the applicable statutes, specific conditions of approval shown on the water right permit, injection well permit, transfer or amendment and the rules and regulations of the Department for water appropriation, injection wells and well construction standards.
2. This drilling permit is valid for two (2) months from the above approval date for the start of construction and is valid for one (1) year from the approval date for completion of the well unless an extension has been granted.
3. This permit does not constitute an approval of the District Health Department or the Idaho Department of Health and Welfare which may be required before construction of this well.
4. The well shall be constructed by a driller currently licensed in the State of Idaho who must maintain a copy of the drilling permit at the drilling site.
5. Approval of this drilling permit does not authorize trespass on the land of another party.
6. This permit does not constitute other local, county, state or federal approvals which may be required for construction of a well.
7. This drilling permit does not represent a right to divert and use the water of the State of Idaho.
8. If a bottom hole temperature of 85° or greater is encountered, well construction shall cease and the well driller and the well owner shall contact the Department immediately.
9. If this permit is for a replacement well, the well being replaced must be abandoned in accordance with Department Rules and Regulations.

SPECIFIC CONDITIONS:

Robert B Whitney FOR

DAVID R. TUTHILL JR. — MANAGER REGIONAL OFFICE

Signature of Authorized Department Representative — Title

Receipt No. W015345 Receipted by RW Fee 35.00 Date 9-2-92

EXTENSION OF DRILLING PERMIT

Extension approved by _____ Approval Date _____

Each extension is good for 60 days from the above extension approval date.