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FEB 02 2009

DEPARTMENT OF
WATER RESOURCES

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

In Re SRBA

) Subcase

85-15713

) (Insert water right number)

Case 39576

) STANDARD FORM 4

) MOTION TO FILE:

) ☒ LATE NOTICE OF CLAIM

) ☐ AMENDED NOTICE OF CLAIM

INSTRUCTIONS

This form is used to file a late Notice of Claim or an amendment to a Notice of Claim in a reporting area where the Director's Report has been filed. Forms may be obtained from the SRBA Court, the Idaho Department of Water Resources (IDWR), or you may copy or reproduce this blank form. If you copy or reproduce this form, please copy on both sides with the even-number pages upside down.

The water right number for your late or amended claim must be indicated above in the blank space following "Subcase." You must use a **separate form for each** late or amended Notice of Claim.

This form has been adopted by the court in **SRBA Administrative Order 1, Rules of Procedure** (amended Sept. 30, 1996), Section 4, which may be consulted for further information.

By filing a *Motion to File a Late Notice of Claim* or a *Motion to File an Amended Notice of Claim*, you certify that it is well-grounded in fact; is warranted by existing law or a good-faith argument for the extension, modification or reversal of existing law; and is not filed for any improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation.

☒ I have read **SRBA Administrative Order 1, Rules of Procedure** (amended Sept. 30, 1996).

My name is VERNON D. AND/OR SHARON B. PERMANN

My address is 25588 COTTONWOOD CREEK ROAD - CULDESAC, ID 83524

My phone number is: Work N/A Home (208) 843-2766

I am an attorney representing _____

My name is _____

My address is _____

My phone number is _____

MOTION TO FILE A LATE NOTICE OF CLAIM

A *Motion to File a Late Notice of Claim* will require a hearing before the Presiding Judge.

☒ I did not file a Notice of claim to the use of water in the SRBA because:

Information only recently (3 days ago) received regarding the development of adjacent farm land into 5 acre parcels which may include the drilling of several additional Wells, has prompted my attention to the necessity for filing of a Water Claim Right. I am unsure if I was advised to file a Water Claim Right when the Well was drilled on August 15, 2002.

☐ I filed a Notice of Claim and elected to defer judicial proceedings on my domestic or stock watering use. I desire to reinstate my Notice of Claim for domestic or stock watering use.

☒ I am providing legal and factual documentation for my claimed use of water. You must describe these documents and attach a readable copy. (You do not need to fill this out if you are reinstating a Notice of Claim for domestic or stock watering use, but you **must** attach a copy of your Notice of Claim.)

1. COPY: IDWR "NOTICE OF CLAIM TO A WATER RIGHT"

2. COPY: "WELL DRILLERS REPORT"

3. EXPLANATION OF PAYMENTS FOR "CLAIM FILING FEE."

I have attached:

- ☒ A fully completed Notice of Claim (available from IDWR).
- ☐ A claim filing fee for a domestic and stock watering use. IDWR may charge this fee pursuant to I.C. § 42-1414. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: State of Idaho Department of Water Resources in the amount of \$ _____.
- ☐ A claim filing fee and a late claim fee for those claims other than a domestic or stock watering use for which a notice of claim was not filed. To determine this amount, contact IDWR at (800) 451-4129. I have enclosed a check payable to: State of Idaho Department of Water Resources in the amount of \$ _____.

Follow these instructions regarding the hearing on this motion.

1. Contact the Clerk of the SRBA Court (208-736-3011) to request a hearing date and time.
2. Fill in the following information:

This motion will be heard on _____
(Insert Date and Time)
at the SRBA courthouse, 253 Third Avenue North, Twin Falls, Idaho.

MOTION TO FILE AN AMENDED NOTICE OF CLAIM

A Motion to File an Amended Notice of Claim may require a hearing before the Presiding Judge or Special Master or may be granted by leave of the court or by written consent of the parties and the Idaho Department of Water Resources. Leave to amend a claim shall be freely given when justice so requires.

- ☐ I must amend my Notice of Claim to the use of water in the SRBA because:

- ☐ I am providing legal and factual documentation to support my amended Notice of Claim. You must describe these documents and attach a readable copy.

I have attached:

☐ An amended Notice of Claim (available from IDWR).

☐ Payment of the following additional fees required by IDWR:

VERIFICATION (Must be completed)

State of Idaho

County of Nez Perce

VERNON D. PERMANN is

SHARON B. PERMANN,

(Insert name of person filing form)

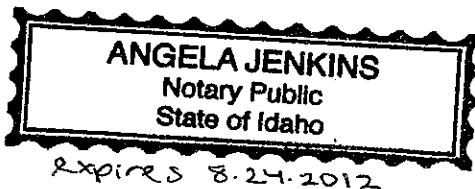
, being first duly sworn, upon oath, deposes and says:

That I am the party/claimant filing this motion for late or amended claim (as listed on Page 2) as defined by I.C. §§ 42-1401A(1) and (7) or that I am the attorney for the party/claimant filing this motion for late or amended claim and that I have read this motion, know its contents, and believe that the statements are true to the best of my knowledge.

Vernon D. Permann
Sharon B. Permann
Signature of person filing motion

Attorney signing in representative capacity

Subscribed and sworn to before me on 1.22.09
(Insert Date)



Angela Jenkins
Notary Public for Idaho
Residing at: Weas Fargo Lewiston ID
My Commission expires: 8-24-2012

INSTRUCTIONS FOR MAILING

You must mail this form, including all attachments, to the Clerk of the SRBA Court. **FAX filings will not be accepted by the SRBA Clerk of the Court.** You must also send a copy to all the parties listed below in the Certificate of Mailing.

CERTIFICATE OF MAILING

I certify that on JANUARY 29, 2009, I mailed the original and copies of this form, including all attachments, to the following persons by mailing the original and/or copies, postage prepaid and addressed as follows:

1. Original to:

Clerk of the District Court
Snake River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls, ID 83303-2707

2. Copies to:

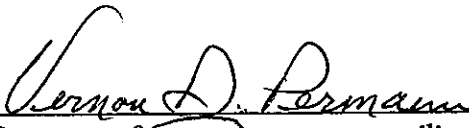
IDWR Document Depository
PO Box 83720
Boise, ID 83720-0098

Chief, Natural Resources Division
Office of the Attorney General
State of Idaho
PO Box 44449
Boise, ID 83711-4449

United States Department of Justice
Environment and Natural Resource Division
550 West Fort Street, MSC 033
Boise, ID 83724

3. If you are filing an amended Notice of Claim in a subcase being heard before the Presiding Judge or a Special Master, you must serve a copy on all parties to that subcase.

(Insert Names/address of parties)


Signature of person or attorney mailing the form

25588 Cottonwood Creek Road
Culdesac, ID 83524
1-208-843-2766
permann7@aol.com

January 22, 2009

Clerk of the District Court
Snake River Basin Adjudication
253 Third Avenue North
PO Box 2707
Twin Falls, ID 83303-2707

Subject: Payment of Water Right Claim Fees

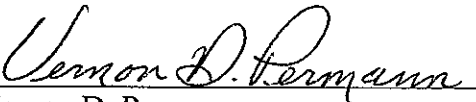
On the date shown above, I filed a "Notice of Claim to a Water Right" as directed under the procedure for a "Late Notice of Claim" to the IDWR.

When I noticed that the instructions for completing the "Notice of Claim to a Water Right" and the enclosed "SRBA Motion to File: Late Notice of Claim" both requested payment of the \$25.00 filing fee, I contacted Cherie Padilla, Water Resource Agent (208)-287-4944. She advised me to send the payment to the IDWR.

I enclosed a check payable to the IDWR in the amount of \$25.00. It was mailed to:
Northern Region – Idaho Department of Water Resources – 7600 Mineral Dr. Ste 100 –
Coeur D'Alene, ID 83815-7763.

Please advise if you require additional information.

Best regards,


Vernon D. Permann

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

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

1. WELL TAG NO. D 22660
 DRILLING PERMIT NO. _____
 Other IDWB No. _____

2. OWNER
Name Indian Health Services/Sharon Permann
Address 1919 E. Francis
City Spokane State WA Zip 99207

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
 W E S
 Twp. 36 North ☒ or South ☐
 Rge. 3 East ☐ or West ☒
 Sec. 25 SW ^{10 acres} 1/4 SW ^{10 acres} 1/4 ^{10 acres} 1/4
 Gov't - Lot _____ NezPerce
 Lat. : : Long:
 Address of Well Site Cottonwood Road
 City Lapwai

Li. Bk. Sub. Name

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	33	13S	Overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 33'

Was drive shoe seal tested? ☒ Y ☐ N How? Air Test

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+1	33	250	Steel	☒	☐	☒	☐
4	-6	240	250	PVC	☐	☒	☒	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

X Perforations Method Saw
Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Under
200	240	1/4x6	1:1	4	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

75 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices: Well Cap

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield-gal./min.	Drawdown	Pumping Level	Time
40+		240	1 hour

Water Temp. 60 Bottom hole temp.

Water Quality test or comments: Good

Death first Water Encounter 189

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

[illegible]

13. DRILLER'S CERTIFICATION--(Roc)

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

Company Name **Stuivenqa Vessey Drilling** Firm No. **545**

Firm Official: [Signature] Date: 8-15-02

Driller or Operator [Signature] Date 8-15-02

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

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 _____
Date Received: _____
Receipt No: _____
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

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

1. Name of Claimant(s) VERNON D. AND/OR SHARON B. PERMANN Phone (208) 843-2766

Mailing Address 25588 COTTONWOOD CREEK RD. CULDESAC IDAHO Zip 83524
Street or Box City State

2. Date of Priority: (Only one per claim) AUGUST 15, 2002
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____

4. Location of Point of Diversion is: Township 36 N, Range 3 W, Section 25,
SW, 1/4 of SW, 1/4 or Govt. Lot _____, BM., County of NEZ PERCE; Parcel (PIN) No. _____

Additional points of diversion if any: _____

If available, GPS Coordinates _____

5. Description of diverting works (Wells, Pumps, Spring boxes, Pipelines, 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. TAG # 22660 → 40 GPM → STATIC WATER LEVEL = 75' BELOW GROUND

WELL - DEPTH: 240 FEET. 1/3 HP SUBMERSIBLE PUMP. W/PRESSURE STORAGE.

DISTRIBUTION TO HOME AND 6 - EXTERNAL FAUCETS. (LAWN, ETC.)

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For DOMESTIC, LAWN, ETC. purposes from JAN 01 to DEC 31 amount 0.089
Month/Day Month/Day (cfs) or (AEA)

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.089 (cfs) or (AEA)

8. Non-irrigation uses. Describe fully. (eg. Domestic: Give number of households served if single ownership; Stockwater: Type and number of livestock) DOMESTIC, ONE (1) HOUSEHOLD, "de minimus"

Form No. 42-1409 (2) b 7/07

9. Location of Place of Use is: Township 36 N, Range 3 W, Section 25,

SW, 1/4 of SW, 1/4, Govt. Lot _____, BM.; Parcel (PIN) No. _____

for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any _____

10. Which county (ies) are lands listed above as place of use located? NEZ PERCE

11. Do you own the property listed above as place of use? Yes (☒) No ()

If the answer is No, describe in Remarks below the authority you have to claim this water right.

12. Describe any other water rights used at the same place and for the same purposes as described above.

None () (BOTH DECEASED)
UNKNOWN - PREVIOUS OWNERS: JAMES F. / CAMILLE BRANCHEAU

13. Remarks:

A SHALLOW WELL - DEPTH UNKNOWN - ALSO EXISTS ON THIS PROPERTY.
THE FORMER OWNERS WERE NEZ PERCE TRIBAL MEMBERS.

14. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff v. Defendant _____

If applicable provide IDWR Water Right Number _____

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand 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: (2)

For Individuals: I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Vern & Bonnie Permann Date: 01-22-2009

Bonnie B. Permann Date: 01-22-2009

For Organizations: I do solemnly swear or affirm under penalty of perjury that I am

_____ of _____
Title Organization

that I have signed the foregoing document in the space below as

_____ of _____
Title Organization

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

Please Print Name

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

Last Name _____ Identification No. _____

verified signatures
on related document.

FORWARD WHITE COPY TO WATER RESOURCES