

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 COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Ident. Number 95-10740
Date Received: 6/30/2009
Receipt No:
Received By: *NO21081*
WA

**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)

DENISE BELLARDI Phone: (208)818-5441
PO BOX 415
ATHOL ID USA 83801

OR

CHRISTOPH BELLARDI Phone: (208)818-2453
PO BOX 415
ATHOL ID USA 83801

2. Date of Priority: 08/08/2005

3. Source: GROUND WATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of 1/4 of 1/4 Lot	County	Type
53N	02W	19	NE NW	KOOTENAI	

5. Description of diverting works:

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	0.02	

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

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of 1/4 Lot	Use	Acres
53N	02W	19	NE NW	DOMESTIC	
			NW NW	DOMESTIC	
			NE NW	STOCKWATER	
			NW NW	STOCKWATER	

11. Place of use in counties: KOOTENAI

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

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: Beneficial Use

16. 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 COEUR D'ALENE-SPOKANE River Basin Adjudication." (b.) I/We do _____ do not X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: 1

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):

Denise Bellardi

Date:

6-30-09

Date:

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. **D0040551**

DRILLING PERMIT N **835064**

Other IDWR No _____

2. OWNER:

Name **Denise & Christopher Bellardi**

Address **P O Box 415**

City **Athol** State **ID** Zip **83801**

3. LOCATION OF WELL by legal description:

N		Twp	53N	North	☒ or	South	☐
W		Rge	02W	East	☐ or	West	☒
E		Sec	19	1/4 NE	1/4 NW	1/4	
S				10 Ac	40 Ac	160 Ac	
		Gov't Lot	County		Kootenai		
		Lat	Long				

East Parks Road & E Whitetail Dr

City **Athol**

Lot _____ Blk _____ Sub. Name (see next line) _____

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/Lbs	
Bentonite	0	-18	7 Sacks	Pour In
Granular				

Drive Shoe Used? ☐ Y ☒ N Shoe Depth(s) _____

Drive Shoe Seal Tested? ☐ Y ☒ N How? _____

8. CASING/LINER

Diam	From	To	Gauge	Material	Casing	Liner	Weld	Thrded
6"	+1	-243	0.250	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

- ☐ Perforations? Method _____
☐ Screens? Screen Type _____

From	To	Slot	Nmbr	Diam	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

230 ft. below ground. Artesian pressure _____ lb.

Depth flow encountered 430, 495, 785 ft. Describe access port or

control devices: **Steel Cap Welded**

11. WELL TESTS:

- ☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
3.5	100%	799	1 HR

Water Temp. _____ Cold Bottom hole temp. _____ Cold

Water Quality test or comments: (below) Depth first Water Encountered 430

Clear, Cold, No Smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality and Temperature	Water	
8	0	1	Top Soil	☐ Y	☒ N
8	1	215	Sand & Gravel 3/4 Minus	☐ Y	☒ N
8	215	230	Granite Brown & White Soft	☐ Y	☒ N
8	230	243	Granite Green & White Black & Brown Medium	☐ Y	☒ N
6	243	356	Granite Green Black Peach & White Medium	☐ Y	☒ N
6	356	389	Granite Green Black Peach & White Broken	☐ Y	☒ N
6	389	430	Granite Green Black Peach & White Hard	☐ Y	☒ N
6	430	450	Granite Black Peach Green & White Soft 1 GPM	☐ Y	☒ N
6	450	470	Granite Green Black White Peach Medium	☐ Y	☒ N
6	470	485	Granite Peach White Green Black Soft	☐ Y	☒ N
6	485	540	Granite Green Black White Peach Medium 1 GPM @ 495	☐ Y	☒ N
6	540	570	Granite Green Black White Peach Soft	☐ Y	☒ N
6	570	590	Granite Black Green White & Peach	☐ Y	☒ N
6	590	730	Granite Green White Black & Peach Medium	☐ Y	☒ N
6	730	785	Granite Green White Black & Peach Soft 1.5 GPM @ 780	☐ Y	☒ N
6	785	800	Granite Green White Black & Peach Medium	☐ Y	☒ N

Completed Depth 800 (Measurable)

Date: Started 8/4/05 Completed 8/8/05

13. DRILLERS CERTIFICATION

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

Firm Name **United Drilling Inc.** Firm No **414**

Firm Official **Jason C. Beckham** Date **8/15/05**

Supervisor or Operator **Jason C. Beckham** Date **8/15/05**

53N 2W 19