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JAN 13 2010

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**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**

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CIVIL CASE NUMBER: 49576

Ident. Number 95-11688Date Received: 5-7-09 / 6/24/09Receipt No: N021016Received By: cm

JUN 24 2009

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**

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1. Name of Claimant(s) Dean F and Roberta DeBower Phone (541) 921-7937
or 7938

Mailing Address P.O. Box 352 Lincoln City, Oregon Zip 97367
Street or Box City State

2. Date of Priority: (Only one per claim) October 26, 1993
Month/Day/Year (YYYY)

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

4. Location of Point of Diversion is: Township 54 N, Range 3 W, Section 27,
NE 1/4 of NE 1/4, or Govt. Lot _____ BM. County of _____

Parcel (PIN) no. RP54N03W271172 A

Additional points of diversion if any: N/A

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.

Well - 48' deep Pumps - 12 gal per minute

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

For domestic purposes from JAN 1 to DEC 31 amount 0.04 cfs
Month/Day Month/Day cfs (X) or AFY ()

For Stockwater purposes from JAN 1 to DEC 31 amount 0.02 cfs

7. Total Quantity claimed 0.06 cfs (X) or AFY ()

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) Domestic - 2 households

Stockwater - 3 horses

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9. Location of Place of Use is: Township 54N, Range 3W, Section 27

NE 1/4 of NE 1/4, Govt. Lot _____ BM. Parcel (PIN) no. RP 54N03W271172 A

If different than shown in Item 4

for (Check One) Domestic () Stock () Domestic and Stock (X) STOCK = RP 54N03W271172

Additional places of use, if any MANUEL - 54N03W2701612 / WEIGHTMAN - 54N03W271172 = DOMESTIC

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

11. Do you own the property listed above as place of use? Yes (X) No (X) STOCK - YES
If the answer is No, describe in Remarks below the authority you have to claim this water right. MANUEL / WEIGHTMAN - NO

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

WE OWNED AND SOLD THE PROPERTY TO WEIGHTMAN.

YOGI MANUEL IS / WAS (PASSED AWAY) MY WIFE'S BROTHER.

or None (X)

13. Remarks:

well drilling permit # 96-93-N-274-000 dated 10/26/93
well drillers report dated 10/27/93

14. Basis of Claim (Check One) Beneficial Use (X) 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 notices in the Coeur d'Alene-Spokane 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)

Dean F. DeBoer

Date: 5/4/09

Debra DeBoer

Date: 5/4/09

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 _____

16. Notice of Appearance:

Notice is hereby given that I, _____, will be acting as attorney at law of 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 _____

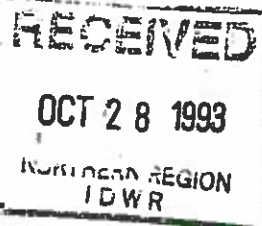
Last Name _____ Identification No. _____

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WELL DRILLER: PLEASE COMPLETE FOR VERBALSIDWR Employee Issuing Verbal: PatriciaVerbal Issued Date: 10-26-93 Time: _____

ENT'D

State of Idaho
Department of Water Resources**APPLICATION FOR DRILLING PERMIT**1. Applicant (please print): Dean DeBower2. Mailing Address: P.O. Box 628City & State Athol, IdahoZip Code 83801

Telephone _____

☒ Well Owner ☐ Well Operator ☐ Contractor or Other, specify _____3. Proposed Well Location: Twp. 54N, Rge. 3W, Sec. 27, NE 1/4 NE 1Gov't Lot No. _____ County BonnerStreet Address of Well Site Old house Rd

Lot, block and subdivision _____

4. Proposed Use of Well:

☒ DOMESTIC: The use of water for homes, organization camps, public campgrounds, livestock (1,000 head or less) a for any other purpose in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in exce 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 2500 gpd.

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

NON-DOMESTIC:

☐ Irrigation☐ Municipal☐ Industrial☐ Stock☐ Test☐ Other

(Over 1,000 Head)

(Describe)

☐ INJECTION☐ MONITORING: A well bore schematic and map is required for each blanket permit.

No. of proposed wells: _____

5. Well Construction Information:

A. ☒ New well ☐ Modify (Deepen or Enlarge) ☐ Replace - See Condition 9B. Proposed Casing Diameter 6" Proposed Maximum Depth 300

C. Anticipated bottom hole temperature:

☒

85°F or less

(Cold Water Well)

☐

85°F to 212°F

(Low Temp. Geo. Well)

☐

212° F. or more

(Geothermal Well)

6. Construction Start Date: Oct 26, 937. Anticipated Well Driller: Bronson Water Wells

NOTE: The actual well driller must be identified prior to drilling.

8. Applicant's Signature Dean DeBowerDate Oct 26, 1993

Title _____

(Owner, Firm Representative, Other)

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ACTION OF THE DEPARTMENT OF WATER RESOURCES

This Permit is Approved

Date 11/3/93

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 G. Haynes

Signature of Authorized Department Representative

Regional Manager

Title

Receipt No. 7113 Received by [Signature] Fee \$35.00 Date 10/28/93

EXTENSION OF DRILLING PERMIT

Extension approved by _____ Approval Date _____

Extension expires: _____

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☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Depth	Time
12		48	2hr

Temperature of water_____ Was a water analysis done? Yes ☐ No ☒

By whom? _____

Water Quality (odor, etc.) _____

Bottom Hole Temperature _____

22 ft. below surface Depth artesian flow found

Artesian pressure _____ lb. Describe access port * cap _____

Describe Controlling Devices:

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

Date: Started 10-26-93 Completed 10-26-93

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

Firm Name Bronson Water Wells Firm No. 360

Firm Official H. D. R. Date 10-27-33

and

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator) MAY - 7 2009

FORWARD WHITE COPY TO WATER RESOURCES