

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 95-11697
Date Received: 12/30/2009
Receipt No: NO23188
Received By: *alt*

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)

JOSEPH W SMITH Phone: (208)610-3014
PO BOX 24
CAREYWOOD ID USA 83809

OR

CAROLYN SMITH Phone: (208)610-3014
PO BOX 24
CAREYWOOD ID USA 83809

2. Date of Priority: 08/02/1977

3. Source: GROUND WATER , GROUND WATER Trib. to: ,

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 Lot	County	Type
54N	02W	30	SW	NW	2	BONNER	
54N	02W	30	NW	NW	1	BONNER	

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	0.03	

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

8. Total consumptive use:

9. Non-irrigation uses:

10. Place of use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
54N	02W	30	NW	NW	1	DOMESTIC	
			NE	NW		STOCKWATER	
			NW	NW	1	STOCKWATER	
			SW	NW	2	STOCKWATER	

11. Place of use in counties: BONNER

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

13. Other Water Rights Used: NONE

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 ☒ 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): Joseph W. Smith
Caroleen Smith

Date: 12-30-09

Date: 12-30-09

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Administration within 30 days after the completion or abandonment of the well.



RECEIVED

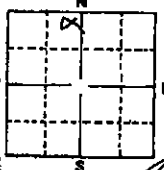
1. WELL OWNER Name <u>WARREN Smith</u> Address <u>Carywood Idaho</u> Owner's Permit No. <u>96-73-N-14</u>	7. WATER LEVEL Static water level <u>40</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow _____ Temperature _____ °F. Quality _____ Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☒ Cap ☐ Plug																																														
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JAN 16 1978

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

Department of Water Resources

1. WELL OWNER Name <u>Cedar Ridge</u> <u>WARREN M. SMITH</u> Address <u>Rt. 1 Box 31 Arhol, Idaho 83501</u> Owner's Permit No. <u>96-77-N-159</u>		7. WATER LEVEL Static water level <u>322</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow _____ Temperature <u>Cold</u> °F. Quality <u>Good</u> Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☒ Cap ☐ Plug																																									
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		11. DRILLERS CERTIFICATION Firm Name <u>Associated Well Drillers Inc.</u> Firm No. <u>245</u> Address <u>Box 723 C. DA. Idaho</u> Date <u>8/3/77</u> Signed by (Firm Official) <u>Bob Thompson</u> and (Operator) <u>Robert F. Degey</u>																																									