

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 95-14446

Date Received: 10/15/2009

Receipt No: 1022473

Received By: JMM

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) Sawyers RONALD S. Phone (Reg) 262-9602Mailing Address 5357 E. SHINE LN. Hayden Zip 83835
Street or Box City State2. Date of Priority: (Only one per claim) FEB 24. 2004
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water ☒ or Other () (a) N/A
which is tributary to (b) N/A4. Location of Point of Diversion is: Township 52N, Range 3W, Section 33
NW 1/4 of NW 1/4, or Govt. Lot _____ BM. County of KOOTENAI RSS.
Parcel (PIN) no. 0-2683-001-015-0Additional points of diversion if any: N/AIf available, GPS coordinates: N/A

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.

00033479
Well completed 2004 connected to home

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

For Domestic purposes from 01-01 to 12-31 amount .04 cfs (X) or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .04 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) 1 Home

9. Location of Place of Use is: Township 52N, Range 3W, Section 33,
NW 1/4 of NW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____

If different than shown in Item 4

for (Check One) Domestic ☒ Stock () Domestic and Stock ()

Additional places of use, if any N/A

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

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.

N/A

or None ()

13. Remarks:

Water Right well Drillers Report Section # 28 is
incorrect should be sec. 33

14. Basis of Claim (Check 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 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) Ron Sanjers Date: 10/15/09
Trustee Date: _____

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. _____

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

RECEIVED

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

1. WELL TAG NO. D0033479 MAR 09 2004
 DRILLING PERMIT NO 810833
 Other IDWR No. IDWB/North

2. OWNER:

Name MB Builders
 Address 2427 W Hayden Ave
 City Hayden State ID Zip 83835

3. LOCATION OF WELL by legal description:

N	Twp	52N	North	☒ or	South	☐
	Rge	03W	East	☐ or	West	☒
	Sec	28	1/4 NW 1/4 NW 1/4			
			10 Ac		40 Ac	160 Ac
	Gov't Lot		County	Kootenai		
	Lat		Long			

Address of Well Site: (see next line)
 City North Morgan Lane to East Shire Lane
 Lot 14 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 Grans	0	18	4 sacks	Pour In

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

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
8	1	163	0.250	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations? Method _____
☐ Screens? Screen Type _____

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

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

140 ft. below ground. Artesian pressure _____ lb.
 Depth flow encountered 265, 247 ft. Describe access port or control devices: Steel Cap Welded

52N 3W 28

11. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
12	100%	263	1 Hour

Water Temp. _____ Cold Bottom hole temp. _____ Cold
 Water Quality test or comments: (below) Depth first Water Encountered 235
 Slight Color, and No Smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Lithology, Water Quality and Temperature	Water
				Y N
10	0	20	Clay: Orange	☐ ☒
8	20	30	Clay: Orange	☐ ☒
8	30	50	Clay: Orange with Shale Gravel	☐ ☒
8	50	130	Clay: Brown and Tan Medium	☐ ☒
8	130	163	Clay: Black Soft	☐ ☒
8	163	235	Basalt: Black Medium	☐ ☒
8	235	240	Basalt: Black 5 GPM	☒ ☐
8	240	264	Basalt Black Medium 7 GPM @ 247 feet	☒ ☐

Completed Depth 264 (Measurable)
 Date: Started 2/18/04 Completed 2/24/04

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 Tim M. Valls Date 2/24/04
 Supervisor or Operator Jason C. Beckham Date 2/24/04

SAWYERS PIN 0-2683-001-015-0

