

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 95-15043

Date Received: 9-2-10

Receipt No: 11025551

Received By: imj

RECEIVED

SEP - 2 2010

IDWR/NORTHERN

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) MORBEU REVOLUBLE TRUST Phone (206) 315-2211

Mailing Address 1001 UNION ST. STE. 370T SEATTLE WA Zip 98101
Street or Box City State

2. Date of Priority: (Only one per claim) Summer 1960
Month/Day/Year (YYYY)

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

4. Location of Point of Diversion is: Township 50N, Range 03W, Section .33
NE 1/4 of NW 1/4, or Govt. Lot 6L1 BM. County of KOOTENAI
Parcel (PIN) no. 0-4620-000-003-0

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.

95-60-N-4 COMPLETED MAY 25, 1960

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

For DOMESTIC purposes from 1/1 to 12/31 amount .044 CFS
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed .044 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 50N, Range 03W, Section 33,
NE 1/4 of NW 1/4, Govt. Lot 641 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 _____

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.

_____ or None ()

13. Remarks:

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) _____

Date: 8/31/10

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 _____ Date _____

Address _____

Last Name MARBLE REVOCABLE TRUST Identification No. _____

WELL LOG AND REPORT OF THE
025990 STATE RECLAMATION ENGINEER OF IDAHO

ENTD
 95-60-N-4

Permit No. 117 Well No. _____ County Kootenai

Owner DON MORBECK

Address LINFOR LUMBER CO. SMELTERVILLE IDA

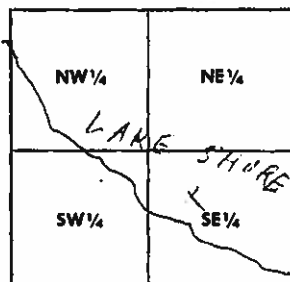
Driller DON HUNT

Address PINE HURST IDA

Well location COVERDALENG LAKE SHORE Sec. 33, T. 50 N. R. 3 E. W.

Size of drilled hole 6

Locate well in section



Total depth of well 96

Give depth to standing water from the ground 35 Water temp. _____ °Fahr.

On "Pumping Test" delivery was 10 g.p.m. or _____ c.f.s. Drawdown was _____ feet.

Size of pump and motor used to make test _____

Length of time of test _____ hours _____ minutes.

If flowing well, give flow _____ c.f.s. or _____ g.p.m. and of shut off pressure _____

If flowing well, described control works _____

(TYPE AND SIZE OF VALVE, ETC.)

Water will be used for DOMESTIC Weight of casing per lineal foot 19

Thickness of casing 14" Casing material steel
 (STEEL, CONCRETE, WOOD, ETC.)

Diameter, length and location of casing _____
 (CASING 12" IN DIAMETER OR LESS, GIVE INSIDE DIAMETER;
 CASING OVER 12" IN DIAMETER, GIVE OUTSIDE DIAMETER)

CASING RECORD

Diam. Casing	From Feet	To Feet	Length	Remarks—seals, grouting, etc.
<u>6</u>	<u>0</u>	<u>96</u>	<u>96</u>	

Number and size of perforations NONE located _____ feet to _____ feet from ground

Date of commencement of well May 16, 1960 Date of completion of well May 25, 1960

S. 33 50 N 3 W

unl

025991

WELL LOG

From Feet	To Feet	Type of Material	Water-bearing Formation Ans. Yes or No	Casing Perforated Ans. Yes or No
0	20'	light brown clay + basalt rubble		
20'	34	brown clay sand		
34	46	" " "		
46	53	basalt		
53'	60'	basalt		
	57'	water course in basalt	yes	
60'	70'	basalt		
70'	78'	brown clay and basalt rubble		
78	92'	gray clay		
92	95	yellow clay		
95	96	hard pan		
96	97	black lava sand water	yes	
		rubble		

If more space is required use Sheet No. 2

WELL DRILLER'S STATEMENT

This well was drilled under my supervision and the above information is true and correct to the best of my knowledge and belief.

Signed Don Hunt

By _____

Dated May 25, 1960.

License No. G-117

MORBECK REVOCABLE TRUST PIN 0-4620-000-003-0

