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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**

CIVIL CASE NUMBER: 49576

ID Number: 95-17003

Date Received: 4-13-2015

Receipt No: 11031166

Amount: 25- By: 2W

**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**

Please type or print clearly

- Name of claimant(s) Paul Boyd and/or Tammy Boyd Phone 661-317-4445
Mailing address 43338 41st Street West Quartz Hill CA ZIP 93536
Street or Box City State
- Date of priority (only one (1) per claim) September 4, 2012
Month/Day/Year (yyyy)
- Source of water supply (check one) Ground Water (x) or Other () (a) _____
which is tributary to (b) _____
- Location of point of diversion is: Township 53N, Range 03W, Section 13-3100,
NW 1/4 of NW 1/4, or Govt. Lot _____, B.M., County of Kootenai
Parcel (PIN) no. 3100 (AIN# 319568)
Additional points of diversion, if any: _____
If available, GPS coordinates _____
- 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.
New Domestic Well, apx 480 ft deep. (Ref. Permit #864279, Well Tag #D0061148).
- 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 (x) AFY ()
For Stockwater purposes from Jan. 1 to Dec. 31 amount 0.01
- Total quantity claimed 0.05 cfs (x) or AFY ()
- Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): Domestic, up to two homes;
Stockwater, up to 4 Horses and/or 4 Cattle.

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9. Location of place of use is: Township 53N, Range 03W, Section 13, NW 1/4 of NW 1/4,
or Govt. Lot _____, B.M., Parcel (PIN) no. (if different than shown in Item 4) _____

For (check one) **Domestic (x)** **Stock ()** **Domestic and Stock (x)**

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 (x) No ()

If your 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 (x)

13. Remarks:

Well Driller's permit #864279, Well ID Tag is #D0061148. See Attachment 1-- Copy of Well Driller's Report.

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 (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) _____

Date: 7 April 2015

Date: 7 April 2015

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, N/A, 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 _____

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

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1. WELL TAG NO. D 0061148

Drilling Permit No. 804279

Water right or injection well # _____

2. OWNER:

Name Paul and Tammy BoydAddress 43338 41st St. WestCity Quartz Hill State CA Zip 93536

3. WELL LOCATION:

Twp. 53 North ☒ or South ☐ Rge. 3 East ☐ or West ☒Sec. 13 1/4 NW 1/4 NW 1/4Gov't Lot _____ County KootenaiLat. 47 56.721 (Deg. and Decimal minutes)Long. 116 39.223 (Deg. and Decimal minutes)Address of Well Site 1/4 mile down south Red Fir Rd.City Athol

(Give at least name of road - Distance to Road or Landmark)

Lot _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation ☐ Thermal ☐ Injection
☐ Other _____

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft)	Placement method/procedure
Bentonite Chips	0	18	550lbs.	overbored

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing Liner	Threaded	Welded
6	+2	480	.250	Steel	☒	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 480'

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method Air perforatorManufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
460	480	1/4"	20	6	Steel	.250

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft)	Placement method
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11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device _____

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 440 Static water level (ft) 440

Water temp. (°F) _____ Bottom hole temp. (°F) _____

Describe access port _____

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
480	100+	120

Test method:

Pump	Bailer	Air	Flowing artesian
☐	☐	☒	☐

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
10	0	18	Top soil, sand and gravel		X
8	18	123	Gravel-all sizes		X
8	123	124	Boulder		X
8	124	222	Gravel-small to medium		X
8	222	228	Boulder		X
8	228	231	Gravel-small to medium		X
8	231	233	Boulder		X
8	233	440	Gravel-small to medium		X
8	440	453	Gravel-medium to large	X	
8	453	462	Boulder	X	
8	462	480	Gravel-Medium to Large	X	

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Completed Depth (Measurable) 480Date Started: Aug 28, 2012Date Completed: Sep 4, 2012

14. DRILLER'S CERTIFICATION:

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

Company Name Horsley Drilling Inc. Co. No. 632*Principal Driller C. Mack Horsley Date Sep 7, 2012*Driller A. Horsley Date Sep 7, 2012*Operator II Jack Horsley Date Sep 7, 2012

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required

53N 03W 13

SCANNED

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