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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: 95-16942Date Received: 10/24/2014Receipt No: N030908Amount: \$25 By: Jm

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) GRANT E. STOWE ETUX TRUSTEES Phone (208) 664-6740
Mailing address 3365 S EBERT RD Coeur d'Alene Idaho ZIP 83814
Street or Box City State
- Date of priority (only one (1) per claim) 04-25-1971
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 50N, Range 02W, Section 31,
SW 1/4 of NW 1/4, or Govt. Lot 3, B.M., County of KOOTENAI
Parcel (PIN) no. 50N02W313800
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.
DRILLED WELL 95-71-N-36 COMPLETED 10-25-1971 AND CONNECTED TO EXISTING HOME
- Water is claimed for the following: (Limited to domestic and/or stockwater uses. See page 1 of the instructions.)

	Month/Day	Month/Day	cfs (x)	AFY ()
For <u>DOMESTIC</u> purposes from <u>01-01</u> to <u>12-31</u> amount <u>.04</u>				
For <u>STOCKWATER</u> purposes from <u>01-01</u> to <u>12-31</u> amount <u>.02</u>				
- Total quantity claimed .06 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.): 1

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9. Location of place of use is: Township 50N, Range 02W, Section 31, SW 1/4 of NW 1/4,
or Govt. Lot 3, B.M., Parcel (PIN) no. (if different than shown in Item 4) _____

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

Additional places of use, if any: T.50N R02W S.31 SW NW GL4

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:

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: 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: 24 OCT 14

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 _____

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USE TYPEWRITER OR
BALL POINT PEN

State of Idaho
Department of Water Administration

WELL DRILLER'S REPORT

State law requires that this report be filed with the State Reclamation Engineer within 30 days after completion or abandonment of the well.

REC'D
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1. WELL OWNER		7. WATER LEVEL Department of Water Administration	
Name <u>GRANT STOWE</u>		Static water level <u>120</u> feet below land surface	
Address <u>CMAA, Ada.</u>		Flowing? ☐ Yes ☒ No G.P.M. flow _____	
Owner's Permit No. <u>95-71-N-36</u>		Temperature <u>cold</u> ° F. Quality <u>good</u>	
		Artesian closed-in pressure _____ p.s.i.	
		Controlled by ☐ Valve ☐ Cap ☐ Plug	
2. NATURE OF WORK		8. WELL TEST DATA	
☒ New well ☐ Deepened ☐ Replacement		☐ Pump ☐ Bailor <u>Air</u> ☒ Other	
☐ Abandoned (describe method of abandoning) _____		Discharge G.P.M. _____ Draw Down _____ Hours Pumped <u>5</u>	
3. PROPOSED USE		9. LITHOLOGIC LOG	
☒ Domestic ☐ Irrigation ☐ Test			
☐ Municipal ☐ Industrial ☐ Stock			
4. METHOD DRILLED			
☐ Cable ☒ Rotary ☐ Dug ☐ Other			
5. WELL CONSTRUCTION			
Diameter of hole <u>8</u> inches Total depth <u>318</u> feet			
Casing schedule: ☒ Steel ☐ Concrete			
Thickness Diameter From To			
<u>12.50</u> inches <u>6</u> inches <u>+1</u> feet <u>60</u> feet			
<u>3/4</u> inches <u>5</u> inches <u>132</u> feet <u>318</u> feet			
_____ inches _____ inches _____ feet _____ feet			
_____ inches _____ inches _____ feet _____ feet			
_____ inches _____ inches _____ feet _____ feet			
Was a packer or seal used? ☐ Yes ☒ No			
Perforated? ☒ Yes ☐ No			
How perforated? ☐ Factory ☐ Knife ☐ Torch			
Size of perforation <u>1/4 DIA</u> inches by _____ inches			
Number From To			
_____ perforations _____ feet _____ feet			
_____ perforations _____ feet _____ feet			
_____ perforations _____ feet _____ feet			
Well screen installed? ☐ Yes ☒ No			
Manufacturer's name _____			
Type _____ Model No. _____			
Diameter _____ Slot size _____ Set from _____ feet to _____ feet			
Diameter _____ Slot size _____ Set from _____ feet to _____ feet			
Gravel packed? ☐ Yes ☒ No Size of gravel _____			
Placed from _____ feet to _____ feet			
Surface seal? ☒ Yes ☐ No To what depth <u>23</u> feet			
Material used in seal ☐ Cement grout ☒ Puddling clay			
6. LOCATION OF WELL		10.	
Sketch map location must agree with written location.		Work started <u>20 Oct 71</u> finished <u>25 Oct 71</u>	
		11. DRILLER'S CERTIFICATION	
County <u>Kootenai</u>		This well was drilled under my supervision and this report is true to the best of my knowledge.	
NW 1/4 Sec. <u>26</u> , T. <u>50</u> N. R. <u>3</u> E. W.		<u>Aqua-Killing Development Inc.</u> 163 Driller's or Firm's Name Number	
		<u>Rt. 1 Orofino, Idaho 83544</u> Address	
		<u>E. Lewis M. Lewis</u> 12-10-71 Signed By Date	

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USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE, BLUE, AND PINK COPIES TO THE DEPARTMENT