

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 95-13903Date Received: 3-25-10Receipt No: N 023890Received By: mm

RECEIVED

MAR 25 2010

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

IDWR / NORTH

1. Name of Claimant(s) HAROLD D MORRIS AND/OR JUDY M. MORRIS Phone () 208 665-2046Mailing Address 12930 E. AERVA Rd. Street or Box City State Zip 838142. Date of Priority: (Only one per claim) 10-5-1967 OCTOBER 5, 1967
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water ☒ or Other () (a) _____
which is tributary to (b) _____4. Location of Point of Diversion is: Township 50N, Range 2W, Section 29,
SE 1/4 of NE 1/4, or Govt. Lot _____ BM. County of KOOTENAI;Parcel (PIN) no. 0-2800-002-019-0

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.

WELL & SUBMERGED PUMP.

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 0.04 cfs
Month/Day Month/Day cfs () or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.04 cfs () or AFY () - LESS THAN 13,000 GALS PER DAY

8. Non-irrigation uses. Describe fully. (eg. Domestic: give number of households served if single ownership;

Stockwater and Number of livestock) Domestic 1 home

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9. Location of Place of Use is: Township 50N, Range 2W, Section 27,
SE 1/4 of NE 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 Domestic 1 home

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: 1 - copy of well DRILLERS REPORT

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) [Signature] Date: 3/23/10

_____ 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 _____ Identification No. _____

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REPORT OF WELL DRILLER
State of Idaho



OCT 10 1967

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

WELL OWNER:

Name S.E. Alden

Address 12116 LEBERT Ave

Coeur d'Alene Idaho

Owner's Permit No. 95-67-N-9

NATURE OF WORK (check): Replacement well ☐

New well ☒ Deepened ☐ Abandoned ☐

Water is to be used for: House & Lawn

METHOD OF CONSTRUCTION: Rotary ☐ Cable ☒

Dug ☐ Other ☐

(explain)

CASING SCHEDULE: Threaded ☐ Welded ☒

6" "Diam. from 0' ft. to 115' ft.

"Diam. from ft. to ft.

"Diam. from ft. to ft.

"Diam. from ft. to ft.

Thickness of casing: 5/8" wall Material:

Steel ☒ concrete ☐ wood ☐ other ☐

(explain)

PERFORATED? Yes ☒ No ☐ Type of

perforator used: PATCH

Size of perforations: 5/8" " by 3/4" "

perforations from 105' ft. to 115' ft.

perforations from ft. to ft.

perforations from ft. to ft.

perforations from ft. to ft.

WAS SCREEN INSTALLED? Yes ☐ No ☒

Manufacturer's name

Type Model No.

Diam. Slot size Set from ft. to ft.

Diam. Slot size Set from ft. to ft.

CONSTRUCTION: Well gravel packed? Yes ☐

No. ☒ size of gravel Gravel

placed from ft. to ft. Surface seal

provided? Yes ☐ No ☐ To what depth?

 ft. Material used in seal: Concrete

Did any strata contain unusable water? Yes ☐

No. ☒ Type of water:

Depth of strata ft. Method of sealing

strata off:

Surface casing used? Yes ☐ No. ☒

Cemented in place? Yes ☒ No ☐

Locate well in section

			X

Sec.

LOCATION OF WELL: County Kootenai

SE * NE * Sec. 29 T. 50 N * R. 2 W

Use other side for additional remarks

Size of drilled hole: 6" Total
depth of well: 115' Standing water
level below ground: 20' Temp.
Fahr. Test delivery: 90 gpm
or cfs Pump? ☐ Bail ☒
Size of pump and motor used to make test:

Length of time of test: 4 Hrs. Min.

Drawdown: NONE ft. Artesian pressure: ft.

above land surface Give flow cfs

or gpm. Shutoff pressure:

Controlled by: Valve ☐ Cap ☐ Plug ☐

No control ☐ Does well leak around casing?

Yes ☐ No ☒

DEPTH

MATERIAL

WATER

FROM TO

YES OR NO

FEET FEET

0'	5'	TOP SOIL	
5'	9'	Gravel Layer	
	9'	Water Table	
9'	15'	seal of to clay at 22'	
15'	52'	Gravel & water	
52'	52'	Blue Clay	
52'	98'	Gravel & clay wet	
	98'	Reddish clay bed	
98'	115'	Water Gravel	
		Many Colours	
		small clay B zone in Gls	
		Large gravel to 1 1/2"	

Work started: SEPT 25 1967

Work finished: OCT 5 1967

Well Driller's Statement: This well was drilled under my supervision and this report is true to the best of my knowledge.

Name: Jim L Fry

Address: Route 1 Box 109 Coeur d'Alene Id

Signed by: Jim L Fry

License No. 109 Date: OCT 16 1967

USGS

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