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Form No. 42-1409-2 (Internet 3/12)

**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: 95-17238Date Received: 12/7/16Receipt No: N032315Amount: \$25.00 By: cm

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) MARK AND/OR ALICIA LATHAM Phone (208)773-3155
Mailing address 950 S CARPENTER LOOP POST FALLS ID 83854
Street or Box City State ZIP
- Date of priority (only one (1) per claim) 09/15/1967
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 05W, Section 18,
NW 1/4 of NE 1/4, or Govt. Lot _____, B.M., County of KOOTENAI
Parcel (PIN) no. 50N05W181120
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.
WELL IN NEIGHBORING PROPERTY WITH PIPELINE TO 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>0.04</u>				
For <u>STOCKWATER</u> purposes from <u>01/01</u> to <u>12/31</u> amount <u>0.02</u>				
- Total quantity claimed 0.06 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.): DOMESTIC USE FOR 1 HOME, STOCKWATER FOR UP TO 20 HEAD OF MIXED SOCK

9. Location of place of use is: Township 50N, Range 05W, Section 18, NW 1/4 of NE 1/4, or Govt. Lot _____, B.M., Parcel (PIN) no. (if different than shown in Item 4) 50N05W181000

For (check one) Domestic () 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:

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)

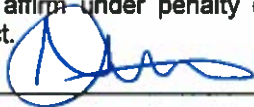
a. By signing below, I/we acknowledge that I/we have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication".

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: 12/07/2016

_____ 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 _____

REPORT OF WELL DRILLER
State of Idaho

OCT 19 1967

Department of Reclamation

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 LONEY M. FINE

Address PLEASANT VIEW Ida

95-67-N-22

Owner's Permit No.

NATURE OF WORK (check): Replacement well ☐

New well ☒ Deepened ☐ Abandoned ☐

Water is to be used for: HOUSE PLANT

METHOD OF CONSTRUCTION: Rotary ☐ Cable ☒

Dug ☐ Other ☐

(explain)

CASING SCHEDULE: Threaded ☐ Welded ☒

6" "Diam. from 0' ft. to 116' ft.

"Diam. from ft. to ft.

"Diam. from ft. to ft.

"Diam. from ft. to ft.

Thickness of casing: 25 WALL Material:

Steel ☒ concrete ☐ wood ☐ other ☐

(explain)

PERFORATED? Yes ☒ No ☐ Type of perforator used: TECH

Size of perforations: 1/2" by 1 1/2"

perforations from 100' 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:

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

		*	

LOCATION OF WELL: County Kootenai

NW 1/4 NE 1/4 Sec. 18 T. 50 N. 5 R. 5 W

Use other side for additional remarks

Size of drilled hole: 6" Total
depth of well: 130' Standing water
level below ground: 46' Temp.
Fahr. Test delivery: 2 c gpm
or cfs Pump? ☐ Bail ☒
Size of pump and motor used to make test:

Length of time of test: 2 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 FROM TO FEET FEET	MATERIAL	WATER YES OR NO
0' 3'	TOP SOIL GRAVEL	
3' 12'	GRAVEL SOME LARGE ROCK CLAY	
12' 48'	DECOMPOSED GRANITE MIXED SAND GRAVEL CLAY WE DRILLERS CALL HARD PAN	
58' 70'	KNOW GN WATER FOR DRILLING	
70' 90'	HARDER DRILLING MORE SAND SMALL GRAVEL MORE WATER	
90' 110'	NATET GRAVEL TIK SIZE BROWN ROCK	
110' 130'	BIGHT BROWN ROCK WATER BAIL TEST 2 c GAL PER MIN.	

Work started: Aug 31 1967

Work finished: Sept 15 1967

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

Name: IRV L FINE Ida

Address: ROUTE 1 BOX 109 Cam Dalen

Signed by: Irving Fine

License No. 109 Date: Sept 5c 1967

USGS

APPLICATION



Legend

- Application PDD
- DQ
- Taxlots
- 2009 1ft Kootenai County
- RGB
- Red Band_1
- Green Band_2
- Blue Band_3

0 145 290 580 870 1,160 Feet

