

MAY 11 2010

IDWR/NORTHERN

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 95-14420Date Received: 5-11-10Receipt No: ND242974Received By: KJ

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) ANDREW AND/OR SOMIA SCHUMACHER Phone (208) 755-4925Mailing Address 2885 S. Folsom Ridge Rd COEUR D'ALENE ID Zip 83814
Street or Box City State2. Date of Priority: (Only one per claim) 8/31/1977
Month/Day/Year (YYYY)3. Source of water supply (Check one) Ground Water (x) or Other () (a) _____
which is tributary to (b) N/A4. Location of Point of Diversion is: Township 50N, Range 2W, Section 30,
SW 1/4 of SW 1/4, or Govt. Lot 8 BM. County of KOOTENAI;Parcel (PIN) no. 5W02W-30-6425Additional points of diversion if any: NONEIf available, GPS coordinates: N/A

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.

SUBMERSIBLE PUMP IN WELL

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 0.02 cfs (x) or AFY ()For STOCK WATER purposes from 1/1 to 12/31 amount 0.027. Total Quantity claimed 0.02 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) 50 HEAD OF MIXED, 2 HOMES

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9. Location of Place of Use is: Township 50N, Range 2W, Section 30,
SW 1/4 of SW 1/4, Govt. Lot 7 BM. Parcel (PIN) no. 50N02W-30-6425
If different than shown in Item 4

for (Check One) Domestic () Stock () Domestic and Stock (X)

Additional places of use, if any 50N02W30SWSW LOT 8

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 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 (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 () 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) Andrew E Schumacher Date: 05/11/2010

_____ 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 _____

Address _____

Date _____

Last Name Schumacher Identification No. _____

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USE TYPEWRITER OR
BALL POINT PEN

State of Idaho
Department of Water Resources

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

1. WELL OWNER

Name Joseph Kirby
Address R7#2 Box 474 Coeur D'Alene Id
Owner's Permit No. 95-77-N-24

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement

☐ Abandoned (describe method of abandoning)

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type)

☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection

4. METHOD DRILLED

☐ Cable ☒ Rotary ☐ Dug ☐ Other

5. WELL CONSTRUCTION

Diameter of hole 6 inches Total depth 105 feet

Casing schedule: ☒ Steel ☐ Concrete

Thickness	Diameter	From	To
<u>1.50</u> inches	<u>6</u> inches	<u>1</u> feet	<u>19</u> feet
<u>1.60</u> inches	<u>4 PVC</u> inches	<u>-18</u> feet	<u>-98</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used? ☐ Yes ☒ No

Was a packer or seal used? ☐ Yes ☒ No

Perforated? ☒ Yes ☐ No

How perforated? ☐ Factory ☒ Knife ☐ Torch

Size of perforation 1/8 inches by 6 inches

PVC Pipe Number 100 From 2.0 feet To 80 feet
_____ 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 depth 18 Material used in seal ☐ Cement grout

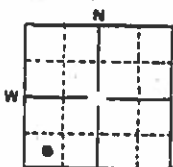
☒ Pudding clay ☐ Wall cuttings

Sealing procedure used ☐ Sherry pit ☐ Temporary surface casing

☒ Overbars to seal depth

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____

Lot No. _____ Block No. _____

County MOOTENIE

SW SW SW Sec. 30 T. 50 N. 18 E. 2 SW

7. WATER LEVEL

Static water level 20 feet below land surface

Flowing? ☒ Yes ☐ No G.P.M. flow _____

Temperature 60 F. Quality Good

Artesian closed-in pressure _____ p.s.i.

Controlled by ☐ Valve ☐ Cap ☐ Plug

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Other AIR

Discharge G.P.M. _____ Draw Down _____ Hours Pumped _____

9. LITHOLOGIC LOG

Hole Diam.	Depth		Material	Water Yes/No
	From	To		
6"	0	2	Sand	✓
6"	2	10	Clay	✓
6"	10	40	Hard Basalt	✓
6"	40	45	Broken Basalt	✓
6"	45	75	Hard Basalt	✓
6"	75	78	Broken Basalt	✓
6"	78	95	Hard Basalt	✓
6"	95	97	Gray Clay	✓
6"	97	105	Red Clay	✓

RECEIVED
SEP 12 1977
Department of Water Resources
Northern District Office

RECEIVED
SEP 16 1977
Department of Water Resources
Northern District Office

10.

Work started 8/30/77 finished 8/31/77

11. DRILLERS CERTIFICATION

Firm Name American Drilling Co. Firm No. 269

Address PO Box 14977 Spokane WA Date 9/1/77

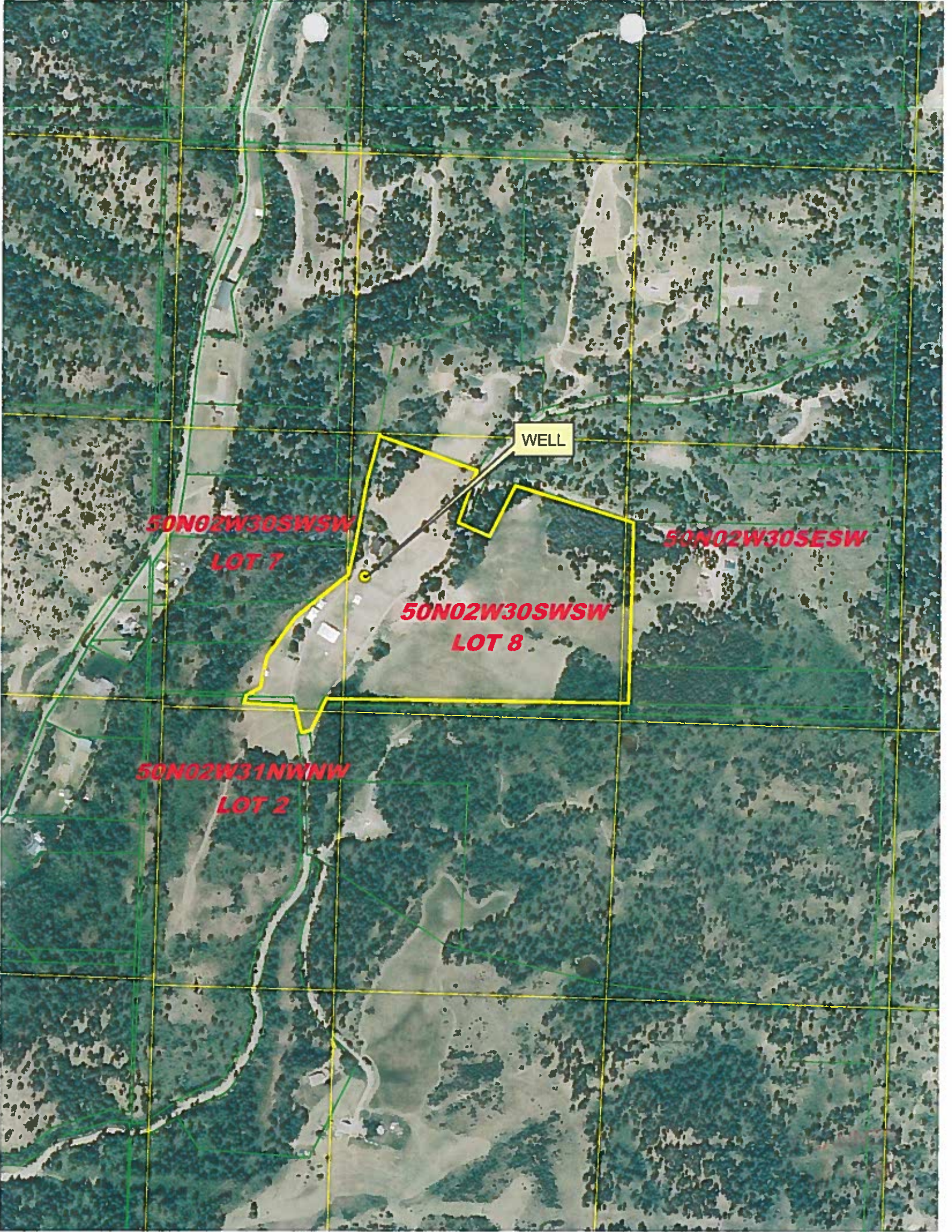
Signed by (Firm Official) Bob

and
(Operator) Mark S. Anderson

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USE ADDITIONAL SHEETS IF NECESSARY

FORWARD THE WHITE COPY TO THE DEPARTMENT



WELL

50N02W30SWSW
LOT 7

50N02W30SESW

50N02W30SWSW
LOT 8

50N02W31NWNW
LOT 2