

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 95-14536

Date Received: 10/27/9

Receipt No: U0221633

Received By: Em

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) Lloyd W. and/or Tamara L. Jacobson Phone (208) 762-9808

Mailing Address 35456 E. Hayden Lake Road Hayden ID 83835
Street or Box City State Zip

2. Date of Priority: (Only one per claim) 5/23/95
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 52N, Range 03W, Section 33
NW 1/4 of NE 1/4, or Govt. Lot _____ BM. County of Kootenai;

Parcel (PIN) no. 009500010010

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 - 820 ft deep

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(✓) or AFY()

For Stockwater purposes from 1-1 to 12-31 amount 0.02

7. Total Quantity claimed 0.06 cfs (✓) or AFY ()

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

Stockwater and Number of livestock) Domestic, 1 home; Stockwater, 4 horses

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9. Location of Place of Use is: Township 52N, Range 03W, Section 33,
NW 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 _____

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: 0

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: 10/27/09

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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OCT 27 2009

OFFICE USE ONLY

Inspected by TDK

Twp 52N Rge 03W Sec 33

1/4 NW 1/4 NE 1/4

Permit No. 95-95-N-0058-500

POSTED

RECEIVED

JUN 15 1995

IDAHO DIVISION
IDWR

HYDRO-FRACTURING LOG

1. OWNER: Name Jerry Boughton
Address: 15603 Hayden Lake Road, Hayden Lake, ID 83835

Total depth 820

Diameter 6"

2. LOCATION OF WELL: County Kootenai
NE 1/4 SW 1/4 Sec. 33 T 52N N.R. 3W WM

3. TYPE OF WORK: Hydro-fracturing

4. WELL TESTS:

Yield: gal./min. with ft. drawdown after Hrs.
Pre-frac: No tests were done
Post-frac:

5. HYDRO-FRACTURING LOG

Hydrofractured at depths of:

420 - 504 ft
336 - 420 ft
252 - 336 ft
168 - 252 ft
84 - 168 ft

6. HYDRO-FRACTURER'S STATEMENT:

This well was hydro-fractured under my jurisdiction and this report is true to the best of my knowledge and belief.

Name Northwest Hydrofracturing

Address W. 14010 Lincoln Road, Spokane, WA 99204

Signed [Signature]

Date 5/23/95 (date job was done)

MICROFILMED

JAN 09 1998

NE SW 33 52N 3W

SCANNED
OCT 27 2009

1. DRILLING PERMIT NO. 95 - 95 - N- 0062 - 000
Other IDWR No. _____

2. OWNER:

Name BOUGHTON, JERRY #2
Address 15603 HAYDEN LAKE RD
City HAYDEN State ID Zip 83835

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.


 Twp. 52 North ☒ or South ☐
 Rge. 03 East ☐ or West ☒
 Sec. 33 1/4 SW 1/4 NE 1/4
10 acres 10 acres 160 acres
 Gov't Lot _____ County ROCKWELL

Address of Well Site: 2ND DRIVEWAY UP HILL -
1 BLOCK BEFORE SPORTSMANS City ACCESS
 (Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. PROPOSED USE:

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

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	45	9 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) _____
Was drive shoe seal tested? Y ☒ N ☐ How? DROVE INTO ROCK

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	43	45	.250	STEEL	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	User
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

0 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices: _____
S. 11 E 33 52 N 34.1

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
0			

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments:

12. LITHOLOGIC LOG: (Describe repairs or abandonment) War

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y
10	0	8	SANDY TOPSOIL LOAMY	
10	8	18	SANDY LOAM CLAY	
8	18	23	SANDY LOAM CLAY	
8	23	46	CLAY & SAND BROWN	
6	46	156	GRANITE WHITE & BLACK MED	
6	156	200	GRANITE WHITE & BLACK GREEN	
6	200	282	GRANITE WHITE & BLACK MED	
6	282	290	GRANITE WHITE & BLACK GREEN	
6	290	322	GRANITE WHITE & BLACK MED	
6	322	340	GRANITE WHITE & BLACK GREEN	
6	340	384	GRANITE WHITE & BLACK MED	
6	384	400	GRANITE GREEN SOFT	
6	400	461	GRANITE WHITE & BLACK GREEN	
6	461	500	GRANITE WHITE & BLACK MED	

~~OFFICE USE ONLY~~

Inspected by TDK

Two 5211 Rps 4312 Sec 35

 $\frac{1}{4} \text{ Nuj } \frac{1}{4} \text{ L. 5 } \frac{1}{4}$

Completed Depth 500 (Measurable)
Date: Started 05/02/95 Completed 05/02/95

13. DRILLER'S CERTIFICATION

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

H2O WELL SERVICE, INC.

Firm Name _____ Firm No. _____

Firm Official Adrian Pittman Date 11/11/2011

and 05/12/95

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)