

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 95-10089Date Received: 1/29/19Receipt No: W 19857 BReceived By: LC

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) JERRY L HANSON Phone (208) 765-6146

Mailing Address 9295 S TALL PINES RD CDA ID Zip 83814
Street or Box City State

2. Date of Priority: (Only one per claim) 11/11/1980
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 49N, Range 04W, Section 9,
SW 1/4 of SW 1/4, or Govt. Lot _____ BM. County of KOOTENAI;

Parcel (PIN) no. 49N04W-09-5950Additional points of diversion if any: 49N 04W 09 SWSW

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.

6. Water is claimed for the following: (limited to Domestic and/or Stockwater uses. See page 1 of the instructions.)

For DOMESTIC purposes from 01/01 to 12/31 amount 0.04 cfs(✓) or AFY()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.04 cfs (✓) or AFY ()

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

Stockwater and Number of livestock) _____

SCANNED
IAN 29 2009

9. Location of Place of Use is: Township 49N, Range 04W, Section 09,
SW 1/4 of SW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. 49N04W-09-5950

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: 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: 1/28/2009

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 forgoing 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.** _____

SCANNED
JAN 29 2009

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.

N

WELL OWNER

Name S J HOOD
Address ST Rt. Coeur d'Alene
Owner's Permit No. IDAHO 53834

7. WATER LEVEL

Static water level 10 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ OF. Quality _____

NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe method of abandoning) _____

8. WELL TEST DATA

☐ Pump ☐ Bailor ☒ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>APPROX. 10</u>	<u>400</u>	<u>PER MIN.</u>

PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

METHOD DRILLED

☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other _____

WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
<u>2.50</u> inches	<u>6</u> inches	<u>3</u> feet	<u>46</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 _____ 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 depth 20 Material used in seal: ☐ Cement grout

☒ Pudding clay ☐ Well cuttings

Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing

☒ Overhore to seal depth

Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

Weld _____

☐ Cemented between strata

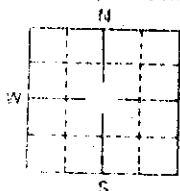
Describe access port _____

10.

Work started 12-31-80 finished 11-4-80

LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____

Lot No. _____

Block No. _____

RASTENAI

11. DRILLERS CERTIFICATION

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

NORTHWEST WATER WELLS

Firm Name INC Firm No. 382

PO Box 1034

Address HAVER HILL Date 11-3-80

IDAHO 53834

Signed by (Firm Official) David A. Smith

and

(Operator) Clarence Shultz



WELL SERVICE, INC.

582 W. Hayden Ave.
Hayden Lake, Idaho 83835

SEPTEMBER 29, 1992

JERRY HANSON
S. 7975 TALL PINE ROAD
COEUR D'ALENE, ID 83814

SUBJECT: WELL TEST

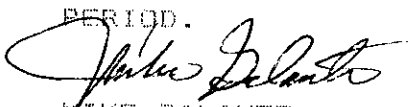
WELL DATA:

WELL LOCATION: TALL PINES ROAD
WELL CONSTRUCTION: 6" 50 10' 4" LINER
WELL DEPTH: 206'
STATIC WATER LEVEL: 7'
TEST PUMP USED: 10EJ10412
PUMP SETTING: 200'
PIPE SIZE: 1"
WIRE SIZE: 12-4
LIQUID LEVEL CONTROLS: NONE
PITLESS: NONE
PUMP HOUSE: EXISTING FOR OLD WELL
CONDITION: NEEDS IMPROVEMENT
PRESSURE TANK SIZE: NONE
ELECTRICAL CONTROLS: NONE

DATE OF TEST: 09/24/92
TIME: 10:45 A.M. TO 2:50 P.M.

SUMMARY:

THIS WELL WILL PRODUCE 5 1/2 GALLONS PER MINUTE OVER A 4-HOUR PERIOD.


MIKE GALANTE
VICE PRESIDENT

8" casing - 200 ft well
2.61 gal/ft.
1" cas 1.47 gal/ft.

1.47
206
302.82
2940
302.82