

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 95-10118
Date Received: 7/4/9
Receipt No: 2019905
Received By: KM

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) Donald & Jo TESKE-Trustees Phone (208) 687-1269

Mailing Address P O Box 713 Rathdrum ID Zip 83858
Street or Box City State

2. Date of Priority: (Only one per claim) Aug 23 1981
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 4W, Section 17,
_____ 1/4 of _____ 1/4, or Govt. Lot 3 BM. County of Kootenai;

Parcel (PIN) no. 52N04W173975

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.

52N 4W 17 PIN 52N04W173975

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 0.15 cfs or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 0.15 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 (one — three future)

SCANNED
539 - 4 2009

9. Location of Place of Use is: Township 52 N, Range 4 W, Section 17,

1/4 of 1/4, Govt. Lot 3 BM. Parcel (PIN) no. 52N04W173975

If different than shown in Item 4

for (Check One) Domestic (☒) Stock (☐) Domestic and Stock (☐)

Additional places of use, if any 3 future residences (minor subdivision)

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) Ronald C. Teske Trustee Date: Feb 1, 2009

Jo A. Teske Trustee Date: Feb 1, 2009

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.

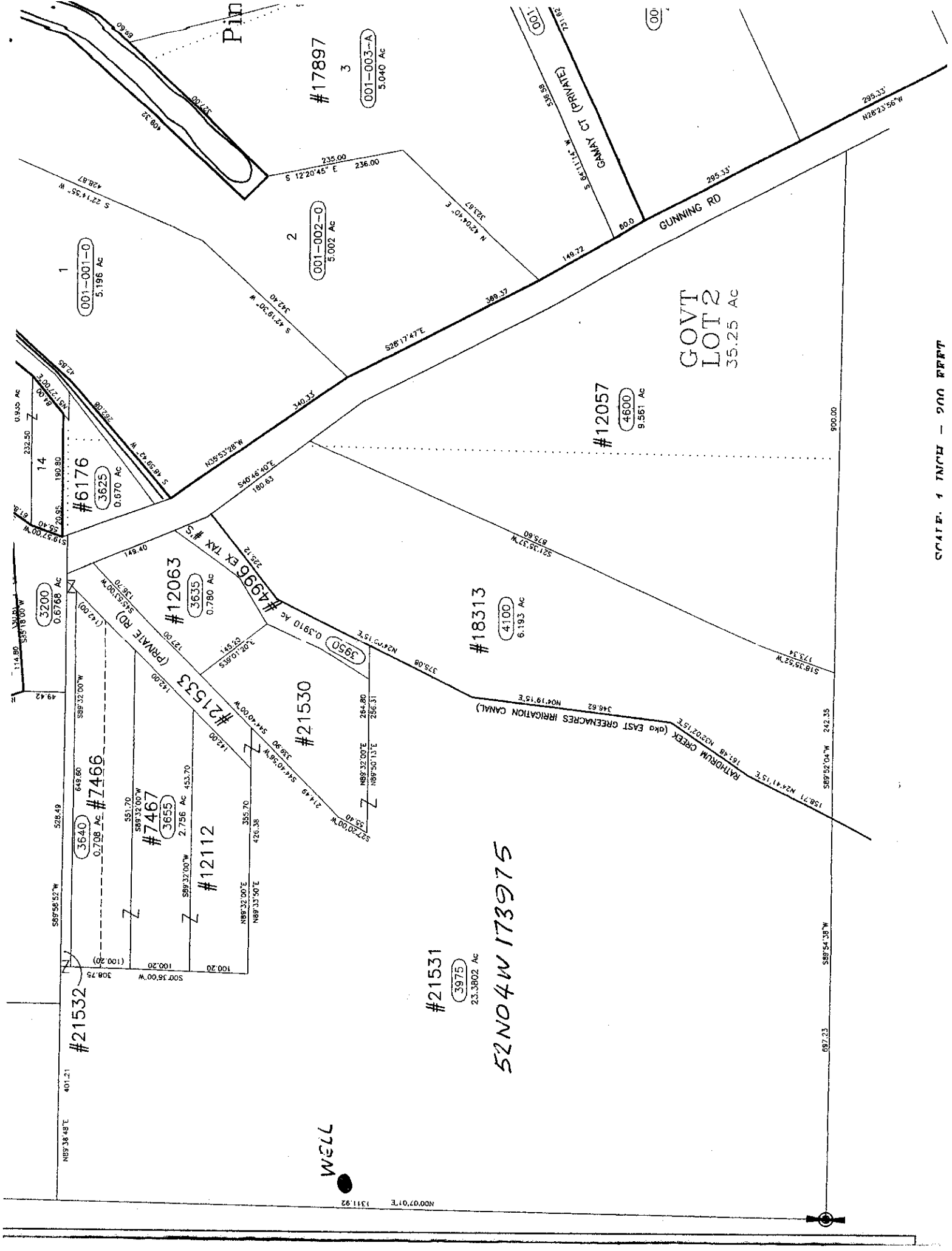
Signature _____

Address _____

Date _____

Last Name _____ Identification No. _____

SCANNED
FEB - 4 2009



SCALE: 1 INCH = 500 FEET

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.

WELL OWNER
Name ARNOLD T. Bacon
Address RT 4 BOX 156 UNL55 ROTHMAN, IL
Owner's Permit No. _____

7. WATER LEVEL

Static water level 205 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.A.L. flow _____
Air lock closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☒ Cap ☐ Plug
Temperature 60°F Quality 6.5 pH

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 Tested
<u>7</u>	<u>2</u>	<u>1 hr.</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 _____

Thickest	Diameter	From	To
<u>2.50</u> inches	<u>6</u> inches	<u>2</u> feet	<u>23.7</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 _____ feet

Placed from _____ feet to _____ feet

Surface seal depth 20 Material used in seal: ☐ Cement grout

☒ Portland clay ☒ Well cuttings

Sealing procedure used: ☐ Shurry pit ☐ Tamp, surface casing

☒ Overbore to seal depth

Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

☐ Weld

☐ Connected between strata

Describe access point _____

9. LITHOLOGIC LOG

Hole Diam.	Depth		Material	W Y.
	From	To		
<u>8</u>	<u>0</u>	<u>75</u>	<u>Gravel - coarse</u>	
	<u>75</u>	<u>120</u>	<u>Coarse sand</u>	
	<u>120</u>	<u>200</u>	<u>Gravel</u>	
	<u>200</u>	<u>238</u>	<u>Fine sand</u>	
	<u>238</u>	<u>254</u>	<u>Gravel</u>	
	<u>254</u>	<u>300</u>	<u>Gravel</u>	

4 GPM AT 240'
36 GPM AT 315'

RECEIVED

NOV 23 1981

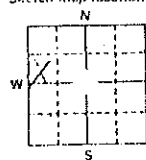
Department of Water Resources

10.

Work started 8/22/81 finished 8/31/81

LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____

Lot No. _____

Block No. _____

County Kootenai

State MT Sec 17 T. 52 N. R. 4 E.

11. DRILLERS CERTIFICATION

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

Firm Name Associated Drilling Firm No. 123

Address Box 155 Date 8/31/81

City Bozeman State MT

Signature (Firm Official) Robert F. Day

and _____

(Operator) Robert F. Day