

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 95-13140Date Received: 8/6/2009Receipt No: N021667Received By: Am

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) Shirley Young Phone 808 687-9368Mailing Address PO 649 Rathdrum Id Zip 83858
Street or Box City State2. Date of Priority: (Only one per claim) 7/3/99
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 5W, Section 26
SW 1/4 of NE 1/4, or Govt. Lot _____ BM. County of Kootenai City
Parcel (PIN) no. 52N05W-26-1250Additional points of diversion if any: NA☒ If available, GPS coordinates: NA

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.

D0003786 Well drilled 1998 & Connected to
Home

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 104 cfs ☒ or AFY ()

For _____ purposes from _____ to _____ amount _____

7. Total Quantity claimed 104 cfs ☒ or AFY ()

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

Stockwater and Number of livestock) 1 home

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9. Location of Place of Use is: Township 52N, Range 5W, Section 26

SW 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 NA

10. In which county (ies) are lands listed above as place of use located? Kootenai city

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) Shirley Young Date: 8/13/09

_____ 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 _____ Identification No. _____

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YOUNG PIN 52N05W-26-1250



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Form 238-7

3/99 JUN 26 1998

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

NORTHERN REGION

IDWR

D0003786

1. DRILLING PERMIT NO.

Other IDWR No. 95-98-N-0074-000

2. OWNER:

Name Gene & Shirley Young

Address 4995 W. Village Blvd.

City Rathdrum State ID Zip 83858

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N				
S				

Twp. 52 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 26 1/4 SW 1/4 NE 1/4
 Gov't Lot _____ County Kootenai
 Lat: _____ Long: _____

Address of Well Site 2.9 Miles

Crystal Springs Rd City _____

(Give at least name of road - Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEA/FILTER PACK			AMOUNT Bags or Pounds	METHOD
Material	From	To		
Casing Seal	0	29	4	overbore
Bentonite				

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 29 1/2'Was drive shoe seal tested? ☒ Y ☐ N How? Air Pressure

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	29 1/2'	1/4	Steel	☒	☐	☒	☐
4"	-9 1/2'	500'	1/2	PVC	☐	☒	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method Sawcut

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
430	500	3/4x4	45	4"	PVC	☐	☒
400	460	"	135	4"	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

145 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or

control devices: Bolted well cap

S2 N 05 W 26

FORWARD WHITE COPY TO WATER RESOURCES

77737

Office Use Only

Inspected by _____

Twp _____ Rge _____ Sec _____

1/4 1/4 1/4

Lat: _____ Long: _____

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

11. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
6-10 GPM			
See Note			
Below			

Water Temp. Cold Bottom hole temp. Cold

Water Quality test or comments: looks Good

Depth first Water Encountered 273

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8"	0	5	Top soil + Clay		
"	5	12	Very Decomposed Granite		
"	12	25	Decomposed Granite		
"	25	29 1/2	Granite Firm		
"	29 1/2	33	Granite Firm		
"	33	109	Soft Granite		
"	109	145	Med Granite w/soft Areas		
"	145	207	Granite w/quartz Firm		
"	207	222	Soft Pink Granite		
"	222	235	Granite w/quartz Firm		
"	235	273	Granite w/quartz Soft		
"	273	278	Granite Pink Soft 1 1/4 gpm	X	
"	278	287	Granite w/lot of Quartz	X	
"	287	307	Granite Pink w/quartz soft		
"	307	335	Granite Firm		
"	335	385	Granite w/quartz soft 1 1/4 gpm	X	
"	385	399	Granite Firm Purple		
"	399	408	Granite w/quartz + Green soft	X	
"	408	430	Granite Purple + Green Firm	X	
"	430	476	Granite w/quartz very Broken	X	
"	476	501	Granite w/quartz Broken	X	

Note: Most of Water In well is Entering between 400'-500' Range. This Formation is very Fractured and appears to store a lot of water. Actual Volume with air Test. Maybe as low as Approx 6 GPM, But could very well maintain 10 GPM with a Pump. would need to be Pump Tested

Completed Depth 500' (Measurable)
 Date: Started 6-5-98 Friday Completed 6-9-98 Tuesday

13. DRILLER'S CERTIFICATION

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

Firm Name AQUA DRILLING & EXPLORATION INC. Firm No. 163

Firm Official Scott M. Braum Date 6-9-98

and Supervisor or Operator Scott M. Braum Date _____

(Sign once if Firm Official & Operator)

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