

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 95-16094Date Received: 10-26-11Receipt No: N028363Received By: ew RECEIVED

NOTICE OF CLAIM TO A WATER RIGHT

OCT 26 2011

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes email IDWR/NORTHERN
Where Daily Use is less than 13,000 gallons per day dmherzer@aol.com

1. Name of Claimant(s) DIANE M. HERZER Phone (208) 437-0646

Mailing Address 231 AKRE DRIVE Blanchard ID Zip 83804
Street or Box City State

2. Date of Priority: (Only one per claim) April 20th 2005
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 54 North, Range 5 West, Section 7,
SE 1/4 of NW 1/4, or Govt. Lot _____ BM. County of Bonner;

Parcel (PIN) no. RPO1456004001A

Additional points of diversion if any: NONE - only to House

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.

Case/liner - 6" 145 FT of 250 gauge steel, pump, SS SCREEN, sealed with Bentonite
Well depth 150' feet, No changes made after initial install lines to house

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 Stockwater purposes from 01-01 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 household, Stockwater

4 cows, chickens, 2 pigs, plus large garden

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9. Location of Place of Use is: Township _____, Range _____, Section _____,
_____ 1/4 of _____ 1/4, Govt. Lot _____ BM. Parcel (PIN) no. _____

for (Check One) Domestic () Stock () Domestic and Stock (☒) If different than shown in Item 4

Additional places of use, if any township T54N R05WS.7 NENW

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

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: Purchased home ~~from~~ in July 2006 from the Stone family.

includes copy of Well report, Map showing well location 2 pages total

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) Hilane Mae Heger Date: 10-25-11

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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Form 238-7
6/02

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Well ID No.			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat:	:	Long:	:

1. WELL TAG NO. D 0039847
DRILLING PERMIT NO. 831952
Water Right or Injection Well No. _____

2. OWNER: Doug Stone
Name _____
Address 361 River Song Ln
City Priest River State ID Zip 83856

3. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. 54 North ☒ or South ☐
Rge. 5 East ☐ or West ☒
Sec. 7 1/4 SE 1/4 100 1/4
Gov't Lot _____
Lat: _____ Long: _____
Address of Well Site AKres Acres
City Blanchard
(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

Seal Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>18</u>	<u>30 lbs</u>	<u>Temp Casing</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 145
Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>71</u>	<u>145</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____
Packer ☒ Y ☐ N Type K

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Factory
Screen Type & Method of Installation COOK pullback

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>145</u>	<u>150</u>	<u>30</u>		<u>6"</u>	<u>S.S.</u>	☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
110' ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

12. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
<u>10+</u>	<u>10'</u>	<u>120'</u>	<u>1 hr</u>

Water Temp. COLD Bottom hole temp. _____
Water Quality test or comments: _____

Depth first Water Encounter 115'
13. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>20</u>	<u>Sand, gravel</u>		☒
<u>6"</u>	<u>20</u>	<u>40</u>	<u>Sand, gravel</u>		☒
<u>6"</u>	<u>40</u>	<u>60</u>	<u>Sand, gravel</u>		☒
<u>6"</u>	<u>60</u>	<u>80</u>	<u>Sand, gravel</u>		☒
<u>6"</u>	<u>80</u>	<u>100</u>	<u>Sand, gravel</u>		☒
<u>6"</u>	<u>100</u>	<u>120</u>	<u>Sand, gravel</u>		☒
<u>6"</u>	<u>120</u>	<u>140</u>	<u>Sand med.</u>		☒
<u>6"</u>	<u>140</u>	<u>160</u>	<u>Sand med.</u>		☒

Completed Depth 150' (Measurable)
Date: Started 3-31-05 Completed 4-10-05

14. DRILLER'S CERTIFICATION

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

Company Name Craig & Sons Firm No. 168
Principal Driller Steve Hitts Date 4-15-05
and
Driller or Operator II _____ Date _____
Operator I _____ Date _____

Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.

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HERZER PIN RP014560040010A



WELL LOCATION ON PROPERTY

