

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 95-16069Date Received: 10-21-11Receipt No: NO28335Received By: [Signature]

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) Jack and/or Nancy Deremer Phone (208) 437-4992

Mailing Address PO Box 416 Blanchard Id Zip 83804
Street or Box City State

2. Date of Priority: (Only one per claim) 4-9-1979
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 54N, Range 05W, Section 8
SW 1/4 of NW 1/4, or Govt. Lot _____ BM. County of Bonner
Parcel (PIN) no. RP54N05W083600A

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 with piping 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 1/1 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) Domestic for 1 home

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9. Location of Place of Use is: Township 54N, Range 05W, Section 8,
SW 1/4 of NW 1/4, Govt. Lot _____ BM. Parcel (PIN) no. Same
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? Bonner

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: 1

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) Nancy Seremer Date: 10/21/11

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 _____ Date _____

Address _____

Last Name _____ Identification No. _____

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STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

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.

1. WELL OWNER

Name Thomas E. Butterfield, Jr.
Address P.O. Box 526 - Blanchard, ID 83804
Owner's Permit No. _____

2. WATER LEVEL

Static water level 200' 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 _____

3. NATURE OF WORK

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

4. WELL TEST DATA

☐ Pump ☐ Bailor ☒ Air ☐ Other _____

Test type: CM Pumping Level: _____ Hours Pumped: _____

17 CM

5. PROPOSED USE

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

6. LITHOLOGIC LOG

Hole Diam.	Depth From To	Material	Water	
			Yes	No
0"	0 - 114	Sand, Gravel & Boulders		X
114	114 - 130	Granite, Medium, Black/White		X
130	130 - 450	Quartzite, Hard, Black/White		X
450	450 - 495	Quartzite, Soft, Brown	X	
495	495 - 600	Quartzite, Hard, Black/White		X

7. METHOD DRILLED

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

8. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____
Thickness Diameter From To
#250 inches 6" inches +2' feet 118' feet
#10 inches inches feet feet
#8 inches inches feet feet
#6 inches inches feet feet

As casing drive shoe used? ☒ Yes ☐ No
As a packer or seal used? ☐ Yes ☒ No
Perforated? ☐ Yes ☒ No

How perforated? ☐ Factory ☐ Knife ☐ Torch
Size of perforation inches by inches

Number	Feet	To
perforations	feet	feet
perforations	feet	feet
perforations	feet	feet

Full screen installed? ☐ Yes ☒ No

Manufacturer's name _____

Type _____ Model No. _____

Sealometer _____ Slot size _____ Set from _____ feet to _____ feet

Sealometer _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? ☐ Yes ☒ No Size of gravel _____

Gravel packed from _____ feet to _____ feet

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

☒ Mudfilling only ☐ Well with cap

Sealing procedure used: ☐ Slurry plug ☐ Temp. surface seal

☒ Overhead seal depth _____

Method of joining casing: ☐ Threaded ☒ Welded ☐ Cement

☐ Cement between strata

Describe access port _____

Work started 04/04/79 finished 04/09/79

9. LOCATION OF WELL

Sketch map location must agree with written location.

Subdivision Name _____
Lot No. _____ Block No. _____
S Bonner

Interv _____

W 1/4 NW 1/4 Sec. 8 T. 54 N. R. 5 W. S. 1 W.

10. DRILLERS CERTIFICATION

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

Firm Name Ponderosa Drilling Firm No. 228

Address 601 Broadway

City Boise State IA Zip 59101 Date 04/10/79

Signature of Firm Owner _____

Signature of Operator _____