

# 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  
**RECEIVED**

CIVIL CASE NUMBER: 49576  
Ident. Number 95-16063  
Date Received: 10-20-11  
Receipt No: N028326  
Received By: cm

OCT 20 2011

IDWR/NORTHERN

## 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) TERRY N. BOOMGAARD / TRUSTEE Phone 208 437-1254  
TERRY N BOOMGAARD LIVING TRUST

Mailing Address P.O. Box 265 BLANCHARD ID Zip 83804  
Street or Box City State

2. Date of Priority: (Only one per claim) 6/2/02 JUNE 2, 2002  
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 ? LEGAL 22/23 - 54N - 5W BLK 1 LOT 23 Range \_\_\_\_\_, Section SPRIT VALLEY  
FARMS REPLAT  
\_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4, or Govt. Lot \_\_\_\_\_ BM. County of BONNER \_\_\_\_\_;

Parcel (PIN) no. RP0043700102 (T54N R05W S. 22 NE NW)

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/PUMP PIPELINE TO HOUSE - WELL TAG # D0022206  
1 FAUCET/HYDRANT IN BETWEEN WELL / HOUSE

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

For USUALLY DOMESTIC purposes from 01-01 to 12-31 amount 104 EFS  
Month/Day Month/Day cfs ( ) or AFY ( )

For \_\_\_\_\_ purposes from \_\_\_\_\_ to \_\_\_\_\_ amount \_\_\_\_\_

7. Total Quantity claimed \_\_\_\_\_ 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 HOUSEHOLD 1 PERSON

MY PERSONAL PLUS WATER PLANTS (MINUTAL)

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9. Location of Place of Use is: Township SAME AS #4, Range \_\_\_\_\_, Section \_\_\_\_\_,  
\_\_\_\_\_ 1/4 of \_\_\_\_\_ 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 \_\_\_\_\_

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

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.

NONE 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 - WELL DRILLERS REPORT

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) Joseph Boonjaest Date: 10/15/11

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. \_\_\_\_\_

SCANNED  
OCT 20 2011

**WELL DRIEDER'S REPORT**

Office Use Only  
Inspected by \_\_\_\_\_  
Twp \_\_\_\_\_ Rge \_\_\_\_\_ Sec \_\_\_\_\_  
\_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4  
Lat: \_\_\_\_\_ : \_\_\_\_\_ : \_\_\_\_\_ Long: \_\_\_\_\_ : \_\_\_\_\_ : \_\_\_\_\_

JUN 03 2002

~~IDWR/North~~

~~IDWR/North~~

Well Number: 390

390

6

10

|  |  |  |   |
|--|--|--|---|
|  |  |  | X |
|  |  |  |   |
|  |  |  |   |
|  |  |  |   |

East or ☒ West

1/4 NE 1/4

Count: 20

County BONNER

Long:       :       :

ite SPIRIT VALLEY FA

City BLANCHARD

\_\_\_\_\_

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

(Replacement, etc.)

☐ Other

Other

| SEAL/FILTER PACK |      |    | AMOUNT          | METHOD   |
|------------------|------|----|-----------------|----------|
| Material         | From | To | Sacks or Pounds |          |
| BENTONITE        | 0    | 18 | 7 BAGS          | OVERBORE |
|                  |      |    |                 |          |
|                  |      |    |                 |          |

Shoe Depth(s) 170

N How?

| Diameter | From | To  | Gauge | Material | Casing                              | Liner                    | Welded                              | Threaded                 |
|----------|------|-----|-------|----------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 6        | +2   | 170 | .250  | STEEL    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5        | -165 | 170 | .250  | STEEL    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Length of Tailpipe 5'

☐ Perforations Method  
☒ Screens Screen Type **JOHNSON STAINLESS**

| From | To  | Slot Size | Number | Diameter | Material |
|------|-----|-----------|--------|----------|----------|
| -170 | 175 | 75        |        | 5        | S. S.    |
|      |     |           |        |          |          |
|      |     |           |        |          |          |
|      |     |           |        |          |          |

Casing ☐ Liner ☐

**PRESSURE:**

SS port or

part of

---

54N 5W 22

☐ Pump    ☐ Bailer    ☒ Air    ☐ Flowing Artesian

LHR

Bottom Hole Temp COLD

CLEAR

Countered\_130

[illegible]

(Measurable)

Completed 5/2/02

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

2 Firm No. 448

Date 5-9-98

504

Date 3-7-07

Todd Morgan