

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 95-10505Date Received: 4/29/09Receipt No: N020436Received By: Jm

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) Anna Jean and (same person) A.J. Randolph Phone 208 683-9308

Mailing Address 25528 N Infinity Rd Arhol ID Zip 83801
Street or Box City State

2. Date of Priority: (Only one per claim) 9/15/1991
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 53N, Range 02W, Section 31,
NW 1/4 of NW 1/4, or Govt. Lot 1 BM. County of Kootenai;
Parcel (PIN) no. 53N02W313150

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 drilled 1991 to 605' 96-91-N-77

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 18 gpm
Month/Day Month/Day cfs (X) or AFY ()

For stock water purposes from 01/01 to 12/31 amount 1.02

7. Total Quantity claimed 1.04 cfs ☒ or AFY ()

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

Stockwater and Number of livestock) 1 home w/ lawn 1 horse

SCANNED
APR 29 2009

9. Location of Place of Use is: Township S3N, Range 02W, Section 31

NW 1/4 of NW 1/4, Govt. Lot 1 BM. Parcel (PIN) no. _____

for (Check One) Domestic () Stock () Domestic and Stock (X)

If different than shown in Item 4

Additional places of use, if any _____

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 (X) 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 (X) 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 (X) 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) Punyeen Randolph Date: 4/29/09

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. _____

1 CANNED
APR 29 2009

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 AJ Randolph

Address 11300 Nunn Rd Ahal 10

Drilling Permit No. 96-91-N-77

Water Right Permit No. _____

2. NATURE OF WORK

☒ New well
☐ Deepened
☐ Replacement

☐ Well diameter increase

☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE

☒ Domestic
☐ Irrigation
☐ Test
☐ Municipal

☐ Industrial
☐ Stock
☐ Waste Disposal or Injection

☐ Other _____ (specify type)

4. METHOD DRILLED

☐ Rotary
☒ Air
☐ Hydraulic
☐ Reverse rotary

☐ Cable
☐ Dug
☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☒ Other PVC

Thickness	Diameter	From	To
<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>99</u> feet
<u>160</u> inches	<u>4</u> inches	<u>99</u> feet	<u>605</u> 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 ☐ Gun
Size of perforation 1/4 inches by 6 inches
Number _____ From _____ To _____
180 perforations 605 feet 545 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 _____
Placed from _____ feet to _____ feet
Surface seal depth 20 Material used in seal: ☐ Cement grout
☒ Bentonite ☒ Puddling clay ☐ _____
Sealing procedure used: ☐ Slurry pit ☒ Temp. surface casing
☐ Overbore to seal depth
Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld
☐ Cemented between strata
Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location.

Subdivision Name _____
Lot No. 12, 504 Block No. 1991
County Kootenai
NE 1/4 SW 1/4 Sec. 31, T. 53 N. 2 S. R. 2 E. 4 W.

7. WATER LEVEL

Static water level 96 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 _____

Describe artesian or temperature zones below.

8. WELL TEST DATA

☐ Pump
☐ Bailor
☒ Air
☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>4-5 GPM</u>	<u>By Air</u>	

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
<u>10</u>	<u>0</u>	<u>7</u>	<u>Brown clay loam</u>		☒
<u>10</u>	<u>7</u>	<u>28</u>	<u>Large Boulders and Clay</u>		☒
<u>6</u>	<u>28</u>	<u>35</u>	<u>Sand Gravel and Boulders</u>		☒
<u>6</u>	<u>35</u>	<u>100</u>	<u>Brown decomposed granite</u>	☒	
<u>6</u>	<u>100</u>	<u>200</u>	<u>Silt and clay granite</u>	☒	
<u>6</u>	<u>200</u>	<u>410</u>	<u>tan sand granite</u>	☒	
<u>6</u>	<u>410</u>	<u>605</u>	<u>Water and Brown Granite</u>	☒	

RECEIVED

JUL 25 1991

Department of Water Resources

101514

RECEIVED

JUL 22 1991

NORTHERN REGION

IDWR

10.

Work started 6-28-91 finished 7-1-91

11. DRILLERS CERTIFICATION

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

Firm Name H2O Well Service Firm No. 448

Address Hayden Idaho Date 7-2-91

Signed by (Firm Official) John Whelan

and Don Carman

(Operator)

USE ADDITIONAL SHEETS IF NECESSARY

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

↑
N

pool

well

