

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 95-10869
Date Received: 5/22/19
Receipt No: NO 20685
Received By: Kee

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) RONALD and/or Victoria Winkler Phone 208 687-1995

Mailing Address 13199 N. IDAHO RD RATHDRUM, ID Zip 83858
Street or Box City State

2. Date of Priority: (Only one per claim) March 31, 1996
Month/Day/Year (YYYY)

3. Source of water supply (Check one) Ground Water (X) or Other () (a) _____
which is tributary to (b) _____

4. Location of Point of Diversion is: Township S1N, Range 05W, Section 3,
NE 1/4 of SE 1/4, or Govt. Lot _____ BM. County of KOOTENAI

Parcel (PIN) no. S1N05W037200

Additional points of diversion if any: N/A

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.

95-95-N-212-000 Well completed on 1-04-96
to depth of 560 feet. Submersible pump 2" pvc to house and F.F. Hopper

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 1.04 cfs or AFY ()

For STOCKWATER purposes from 01-01 to 12-31 amount 1.02

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

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

Stockwater and Number of livestock) One home, 18 HEAD MIX
STOCK.

RECORDED

MAY 27 2019

9. Location of Place of Use is: Township 51N, Range 05, Section 3

NE 1/4 of SE 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 _____

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 ☒ 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:

Well Location inaccurately recorded on
well log as NE SW

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) [Signature]

Date: 5-21-09

[Signature]

Date: 5-21-09

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 _____ Date _____

Address _____

Last Name _____ Identification No. _____

SCANNED
MAY 22 2009

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

Office Use Only	
Inspected by <u>TDK</u>	
Twp <u>51N</u> Rge <u>05W</u> Sec <u>03</u>	
<u>1/4 NE 1/4 SE 1/4</u>	
Lat: : : Long: : :	

1. DRILLING PERMIT NO. 95-95-N-212-000Other IDWR No. NR 1000N

2. OWNER

Name WINKLER, RONAddress 1924 E HANLEYCity COEUR D'ALENE State ID Zip 83814

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

N W E S					
		X			

Twp. 51 ☒ North or ☐ South
Rge. 05 ☐ East or ☒ West
Sec. 03 1/4 NE 1/4 SW 1/4
Gov't Lot _____ County KOOTENAI
Lat: : : Long: : :
Address of Well Site IDAHO RD
City RATHDRUM

(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/FILTER PACK		AMOUNT		METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	200	3 SACKS	POWDER

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 298Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner Welded	Threaded
4	280	560	.160	PVC	☐	☒	☐
6	+2	298	.250	STEEL	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method SAWCUT
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
520	560	1/16	60	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

275 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices:

NE SW 3 51N SW

11. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
30+			1 HRS

Water Temp. COLD Bottom Hole Temp _____Water Quality test or comments: CLEAN

Depth first Water encountered _____

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam.	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
				Y	N
8	0	1	Topsoil, Brown Soft	☐	☒
8	1	80	Gravels, sand, Brown	☐	☒
8	80	150	Course, Sands, Tan	☐	☒
8	150	200	Clays, Fine Sand, Tanish	☐	☒
8	200	260	Course Sand Tanish	☐	☒
8	260	280	Clays Blueish	☐	☒
8	280	298	Clays, Decomposed Granite	☐	☒
6	298	370	Decomposed Granite	☐	☒
6	370	400	Granite Black White Hard	☐	☒
6	400	490	Granite White Brownish Medium	☐	☒
6	490	530	Granite White Black Hard	☐	☒
6	530	540	Granite White Black Fractured	☒	☒
6	540	560	Granite White Black Hard	☐	☒

Completed Depth 560' (Measurable)Date: Started 01/02/96 Completed 01/04/96

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 H2O WellService, Inc. Firm No. 448Firm Official John Cochran Date 1-23-96

and

Supervisor or Operator Mark D. J. Date 1-15-96

(Sign Once if Firm Official and Operator)

Winkler 51N05W037200

