

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 95-11004

Date Received: 5/28/2009

Receipt No: 2020736

Received By: dm

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) Sean Moore Phone (208) 687-1727Mailing Address 20091 N. Gunning Rd Rathdrum ID Zip 83858
Street or Box City State2. Date of Priority: (Only one per claim) 9/20/03
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 52N, Range 4W, Section 17,
NE 1/4 of SW 1/4, or Govt. Lot _____ BM. County of Kootenai;
Parcel (PIN) no. 52N04W 174950

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.

D0028829 drilled 2003

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) 1 home

SCANNED

MAY 28 2009

9. Location of Place of Use is: Township 52N, Range 04W, Section 17,
NE 1/4 of SW 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: Residence was previously connected to local
water association. Replaced by well drilled in 2003

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) Sean Moore Date: 5/24/09

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 _____

Address _____

Date _____

Last Name _____ Identification No. _____

SCANNED

MAY 28 2009

MOORE PIN 52N04W174950



well

PDU

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT
RECEIVED

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

1. WELL TAG NO. D0028829 SEP 23 2003Drilling Permit No: 806772

Other IDWR No. _____ IDWR/North _____

2. OWNER Well Number: _____

Name PIERCE, MIKE & LONNIE 650Address 20091 N. GUNNING RD.City RATHDRUM State ID Zip 83858

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

N		Twp. <u>52</u> ☒ North or ☐ South	
W		Rge. <u>4</u> ☐ East or ☒ West	
E		Sec. <u>17</u> <u>1/4 NE 1/4 SW 1/4</u>	
S		Gov't Lot _____ County <u>KOOTENAI</u>	
X		Lat: _____ Long: _____	
		Address of Well Site <u>SAME</u>	
		City <u>SAME</u>	

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Bk. _____ 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	
DRY GRANULE				
BENTONITE	0	18	10 BAGS	OVERBORE

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	375	.250	STEEL	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

240 ft. below ground Artesian pressure _____ lb.Depth flow encountered 340 ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
20			1 HR

Water Temp. COLD Bottom Hole Temp COLDWater Quality test or comments: GOODDepth first Water encountered 375

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
8	0	3	Top Soil	☐	☐
8	3	150	Gravels	☐	☐
8	150	205	Boulders, Small Gravel & Sand	☐	☐
8	205	275	Sand & Gravel	☐	☐
8	275	309	Gravels	☐	☐
8	309	311	Boulder	☐	☐
8	311	317	Gravel	☐	☐
8	317	319	Boulder	☐	☐
8	319	375	Gravels	☒	☐

Completed Depth 375 (Measurable)Date: Started 9/10/03 Completed 9/12/03

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 428 WellService, Inc. Firm No. 448
Firm Official [Signature] Date 9-16-03
and
Supervisor or Operator [Signature] Date 9/15/03
(Sign Once if Firm Official and Operator)

Jim McLeslie

52N 4W 17